DOCUMENT RESUME

ED 277 845 CE 046 068

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TITLE Developing Effective In-Service Training Programs.
INSTITUTION Wisconsin Univ.-Stout, Menomonie. Stout Vocational Rehabilitation Inst.
SPONS AGENCY Rehabilitation Services Administration (ED), Washington, DC.
REPORT NO ISBN-0-916671-00-3
PUB DATE 84
NOTE 272p.
AVAILABLE FROM Materials Development Center, Stout Vocational Rehabilitation Institute, University of Wisconsin-Stout, Menomonie, WI 54751.
PUB TYPE Guides - Non-Classroom Use (055)

EDRS PRICE MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS *Curriculum Development; Disabilities; Educational Resources; Improvement Programs; *Inservice Education; Institutes (Training Programs); Job Training; Models; Needs Assessment; Postsecondary Education; *Program Development; Program Evaluation; *Rehabilitation Centers; Rehabilitation Programs; *Staff Development

ABSTRACT

This manual provides step-by-step directions for developing an inservice staff training program in a rehabilitation facility. The manual is organized in five chapters. Following an introduction that defines inservice training, the first chapter discusses inservice problem identification procedures (conduct a needs assessment and determine present performance and existing deficiencies), while the second chapter presents 10 steps for developing an inservice training program (commit the facility to staff training; select training objectives; write performance objectives; select course prerequisites; select and sequence course content; construct competency tests; select an instructional method; determine instructor requirements; select and prepare training aids; and determine equipment requirements). The third and fourth chapters provide information on evaluating the inservice training program and responding to changing inservice needs. The final chapter presents three models of training programs: the Stanton conferencing instructional package for group instruction; the Rottier "turnover notebook" style of instructional packages for individual learning; and the Rehabilitation Associate Training for Employed Staff (RATES) modules for individual or group learning. Appendixes contain needs assessment formats, a DACUM chart format for developing curriculum objectives, a chart of instructional strategies, a resource list, and inservice training forms and curriculum. (KC)

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DEVELOPING EFFECTIVE IN-SERVICE TRAINING PROGRAMS

Christopher A. Smith

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ISBN: 0-916671-00-3

Library of Congress Catalog Card Number: 84-61737

This publication was funded in part by a grant from the **Rehabilitation Services Administration**, U.S. Department of Education, Washington, D.C.

ACKNOWLEDGEMENT

Information is the life blood of an organization. By facilitating information exchange through the development of training programs, an organization can vigorously meet its changing environment and prepare to fulfill its mission in the community.

Through the supportive training opportunities offered the author while at Area Residential Care, Inc., Dubuque, Iowa, many growing possibilities were opened that eventually led to the completion of this manuscript.

Parts of this manuscript were edited from the projects of graduate students at the University of Wisconsin-Stout and from materials developed by the U.S. Army. The author is grateful for permission to include these works.

Like most Materials Development Center publications, many hours of assistance from other University of Wisconsin-Stout department staff members are represented in this finished product. The cooperative efforts of University of Wisconsin-Stout faculty and staff embodied in this publication can hopefully lead to a broader base of educational opportunities for all rehabilitation facility staff members.

Christopher A. Smith
Menomonie, Wisconsin
July, 1984

DEVELOPING EFFECTIVE IN-SERVICE TRAINING PROGRAMS

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INTRODUCTION

An administrator relies on skilled staff to carry out the missions of the facility. Insuring that staff possess the skills to complete the facility's mission is a primary management function. An administrator attempts to hire those persons best qualified to carry out job assignments. Because the required skills, however, are only partially existing when a person is hired, facility managers must use training programs to supplement skills that new staff members bring to the job and that staff presently possess.

A facility manager can choose from three types of training programs. Training can be provided while staff are working, generally known as "on-the-job" training. Training can be provided off the job but within the facility, known as "in-service" training. Finally, training can be provided away from the facility itself, generally known as "education." This publication will limit its presentation to those activities known as "in-service" training.

In-service training provides specialized information to staff to meet three basic organizational information needs: knowledge of assigned tasks, skill to carry out assigned tasks, and motivation to complete assigned tasks.

In-service training helps staff meet these needs in three ways. First, in-service training provides data that relates task completion to the fulfillment of the facility's mission. Second, in-service training develops the skills necessary for staff to complete their assigned tasks. Third, in-service training can provide a morale building system leading staff to be motivated to produce good work.

Defining In-service Training

In-service training is defined in three major ways: (1) as the improvement of job performance by the provision of organized staff activities, (2) as a tool for preventing and correcting facility problems, and (3) as a tool for completing facility missions. In-service training programs are often provided as the result of management concerns that staff are not as productive as they could be. In-service training is designed to improve job performance by either providing information about better methods to carry out assigned jobs or providing reorientation to the "correct" method. In addition in-service training, defined as organized activities to improve job performance, is useful to provide job or facility orientation. Orientations provide information that new job holders will need to carry out their assignments in an efficient manner.

In-service training programs can also be provided after the discovery that staff problems exist. Low morale, high absenteeism, high turnover, high material spoilage, failure to meet accreditation standards, difficulty in justifying the length of training periods, low success rates for placement activities and many other discoveries lead facility administrators to provide in-service training in an attempt to solve the problems.

In-service training is a management tool that leads to the fulfillment of the facility's mission. To meet mission objectives facility administrators rely on the collective effort of all staff. When staff do not work efficiently, the fulfillment of the facility's mission is delayed. When inefficiency (defined as a gap between desired job performance and actual job performance) becomes apparent, in-service training can be provided in an attempt to reduce the difference. This will then result in changes in staff work behavior. By allowing staff to gain knowledge, skills, or attitudes that enhance their ability to meet performance standards, the fulfillment of facility mission is advanced.

The Goals of In-service Training

Administrators provide staff in-service training to meet specific goals; the general goals of improving personnel job performance, preventing and correcting problems, and completing the facility's mission form the basic definitions of in-service training. These goals meet specific facility needs. In-service goals can meet facility needs to:

Increase productivity
Increase cooperation and understanding
Increase effective service provision
Reduce staff turnover
Reduce facility costs per service unit
Cut waste
Improve delivery systems
Lower absenteeism
Retain staff for longer periods
Speed basic information transfer

Lower overtime costs
Reduce staff grievance reports
Improve quality of service delivery
Reduce accident rate
Develop supervision talent
Strengthen internal communications
Improve worker satisfaction

Every facility administrator asks the developers of in-service training programs to meet training needs unique to their facility. However, the developers must be careful to identify needs that can be solved by in-service training.

In-service Training Cannot Meet All Facility Needs.

Facility administrators sometimes provide in-service training in an attempt to find a quick cure for facility problems. Rushing into "quick-fix" training with high expectations often leads to letdowns for both staff and management. "Quick-fix" training often fails to measure up to the expectations held for its use and leads to the rejection of further training programs.

In the excitement of a "quick-fix," administrators may fail to recognize that not all facility problems can be solved by the use of in-service training. Training alone cannot offset problems generated by inadequate salaries, provide staff with skills when prerequisite abilities are absent, or produce motivated employees without other management assistance.

The excitement of "quick-fix" is often coupled with a desire to get staff to do their jobs "right." This may create resistance and resentment from staff. Staff can perceive in-service training as a management ploy forcing them to perform their jobs in new, unfamiliar, and possibly more difficult ways. Staff resistance and resentment to training produces unsuccessful training programs. Of course the in-service program gets the blame.

Other administrators who rush into in-service training for a "quick-fix" are administrators reluctantly providing in-service training either because other facilities are doing it or because an accreditation or funding agency said that they should. Lacking real conviction for an in-service program, the administrators develop programs that are poorly planned and, therefore, fail. Once again, the in-service training program receives the blame for the failure.

Effective in-service training programs are developed to meet specific facility needs that (1) can be solved by staff training and (2) are designed to produce a specific end result. In addition, the development of in-service training programs must be responsive to each facility's changing needs for staff training.

This publication is designed to allow each facility to identify its own unique training needs and to develop individualized training programs to meet these needs. In addition the programs developed can be adapted to meet new needs as the facility's training requirements change.

IN-SERVICE PROBLEM IDENTIFICATION PROCEDURES

Conduct a Needs Assessment.

Needs assessment is the identification and validation of needs and establishment of need priorities. An assessment can cover the entire operation of a facility or be confined to one specific area. Whatever the scope of an assessment, there are two steps in determining needs: problem identification and competency modeling.

In problem identification, facility administrators look for deficits in staff work performance and attempt to determine the deficit causes. The problems are then written into action steps to provide needed solutions. Solutions involving training are written as training objectives, a curriculum is developed, and the training takes place.

In performance problem identification, administrators depend upon competency modeling (a description of desired staff performance) to help them pinpoint "problem" areas. Present staff performance is compared with the competency model to identify areas where performance could be improved. Without using a competency model, any performance activity could be considered adequate. Problems exist only when present performance is considered less than the performance required by the competency description.

The emphasis of needs assessment for developing in-service training programs is, thus, dependent upon discovering gaps (or differences) between the desired level of competent performance and present behavior. This approach to needs assessment must start with the determination of competent performance. An examination of facility performance objectives and of the staff's present competency to carry out those objectives defines the areas in which the in-service training program will be developed.

Needs assessments must also provide data on future performance needs. New skills should be integrated into the assessment information. This data may take the form of known legislation effecting the facility, changing accreditation standards, or the provision of new services.

Facility administrators considering expansion into new areas of service delivery may find it desirable to provide training for staff involved in the service delivery. For example, a facility providing client training in janitorial tasks may desire to expand into community contracting of janitorial services. It would, therefore, be desirable to provide the janitorial training staff with training in contract bidding and administration.

There are three broad groups of contributing to the description of competent performance: management, third party payers, and community. To form the criteria for the development of competent performance, assessments must take into account the concerns of each group. This requires an organized effort to collect competency data.

McCready (1979) presented a data gathering process that is useful in needs assessment:

A. Conduct a preliminary and brief investigation by making a few telephone calls to gather competency opinions. Evaluate the situation before beginning a major data gathering effort.

B. Decide what data is needed by making a preliminary listing of the competency areas to investigate. Develop clearly written statements reflecting these data needs. Too much data confuses the issue; insufficient data frustrates the achievement of accurate results.

C. Evaluate available resources. Determine the amount of time, energy, and people that the facility is willing to expend in the gathering of competency data.

D. Determine a data gathering method by examining what data is to be gathered and the resources that will be expended.

Data gathering for determining competency performance can be accomplished in many ways. Brainstorming sessions with persons knowledgeable in the competency area, published sources of information, such as standards written by accrediting agencies or certification councils (CARF or CCWAVES) and assessments completed by affiliate organizations are useful data gathering sources.

In brainstorming sessions, competency data are gathered through group exchange of ideas. A group of people knowledgeable in the competency area meet together and use personal knowledge about the area to state their ideas of competency. As each participant discusses their ideas, other group members build upon the data presented. The resulting consensus descriptions of competency has benefitted from the insights of many.

While gathering competency data, administrators should search for information from already published sources. Accreditation and certification sources are primary reference mediums, but others may also exist. Job data can be obtained from sources such as:

Job Service Offices
The Dictionary of Occupational Titles
Federal and State VR Offices
Colleges and universities
Other rehabilitation facilities
Textbooks

Organizing competency data can be accomplished using a method developed in Canada by the Nova Scotia Newstart Program, DACUM (Developing a Curriculum). To identify competency areas, a chart is prepared that represents the tasks that staff are required to complete. The identification of these competency areas is assigned to a committee made up of persons with expertise in the position requirements. This committee has access to the data gathered from brainstorming, publications, and assessments. The committee begins by writing the gathered competency data on cards. To ensure that the definitions are behaviorally based the following format is used: "Staff must be able to..." followed by a verb (see Appendix B). The committee sequences the skills but the sequence is not based on educational or learning prerequisites.

The sequence is determined by deciding the tasks that an employer wants the employee to acquire first. The committee places on the left of the chart those skills an employer wants an employee to learn early so that the employee may quickly perform the most important tasks in the completion of the job. A final inspection for changes and additions is then made. When no further changes or additions are suggested the definition task is complete. (Jones, 1978)

Competency data will be used to identify gaps between desired and present performance. The data will also be helpful to determine possible training frequency such as sessions to be offered on a regular basis, as a single training opportunity, or sessions that will be offered as needs indicate. Competency data also helps to determine who receives training.

Determine Present Performance

After collecting information about desired work performance, it is necessary to compare this desired performance with actual performance. Job analysis is the primary source of actual performance data. The data resulting from the comparison of job analysis and the desired performance are used to determine the objectives, content, sequence, emphasis, and means of conducting and evaluating in-service training programs.

Job data must be collected under the supervision and control of facility administrators to enable the coordination of such related actions as recruitment, selection and assignment, and facility planning. The gathering of job analysis data is accomplished in three phases: planning, collecting, and forming job task matrices.

Preliminary planning based on needs assessment information must be completed prior to the collection of job data. The performance area to be analyzed must be selected, the staff who will complete the job analyses must be chosen, and data collection forms must be developed in the planning phase. The actual collection of data is accomplished by interview and observation of staff. Further information is gathered through interviews with supervisory personnel. During job analysis, data are collected describing the job, conditions under which the job is performed, and standards of acceptable performance. The final consolidation phase incorporates individual job analysis into one job task matrix describing similar and different aspects of many facility positions. Job task matrices are formed by listing tasks identified through job analysis in rows on the left of a grid (see Figure 1). Each job is listed in columns at the top. Each task occurring in a job will receive a check under the job title. The resulting matrix clearly indicates similar and unique job tasks.

The statements of job duties collected during job analysis must be written in a format that allows them to be used to develop training curriculums. Each statement describes present staff work behavior, the conditions under which the performance is expected, and the quality of performance.

Analysis staff should make statements that describe what staff actually do. This is usually an observable action. Statements should begin with

an action verb, such as writes, evaluates, or performs. The description should also indicate those factors that directly affect staff performance. After the verb will be a statement that indicates the tools, equipment, supervision, or assistance needed to perform the task. Finally, where acceptable performance can be easily described, the statement of job performance should include a judgment of quality and/or quantity. A job task statement such as assesses client performance on the operation of rip saw three times per shift, incorporates all three elements of an analysis statement. Assesses client performance is action oriented, operation of the rip saw indicates the tools needed, and 3 times per shift indicates the standard of acceptable performance.

	Vocational Instructor	Janitorial Crew Foreman	Client Program Coordinator	Program Supervisor	Materials Handler	Work Station Supervisor	Agency Social Worker
Prepares instructions for vocational learning.	X					X	
Delivers lessons within program learning area.	X					X	
Observes and records client performance of program job tasks.	X	X				X	
Evaluates client performance and prepares remedial instruction.	X	X	X			X	
Assigns work experience tasks to sheltered clients.	X	X			X	X	
Supervises the activities of staff working with clients.			X	X			
Assesses client movement to and from programs.	X	X	X	X			X

Figure 1: Job Task Matrix

Determine That Deficiencies Exist

To this point facility administrators have gathered information about the skills needed by staff to carry out their jobs. This information has been gathered by polling expert opinions about the skill areas needed, investigating future needs indicated by field trends, and adding planned facility service expansion. The administrators have also analyzed present staff performance. Now the administrators need to decide if gaps exist between desired and demonstrated performances.

If an administrator discovers a gap between performance and competency, several major decisions must be made: Does the gap warrant the expenditure of facility resources to close? If so, is the gap a performance problem that can be solved by training, and is in-service training the best method of training to use? Mager (1970) developed a question/response strategy that can aid administrators in considering alternatives to gaps that they may believe exist.

Figure 2 presents Mager's questions for the analysis of perceived training problems. The questions listed under each decision point (diamond shape) are provided to guide administrative thinking to answer the question posed at each decision point. Determined by the "yes" or "no" answers to each decision point question, the administrator is lead to another decision point, an action statement outside of the scope of this investigation (square shape), or an action statement that completes the investigation (rectangular shape).

When faced with a possible performance problem the administrator first must decide that a performance problem does exist and that changing the performance is important. Then the administrator considers two major lines of investigation. The line of investigation correctly used is based on the decision that the performance problem exists as a skill deficit. If the problem is a skill deficit, the administrator must decide if staff can perform as desired or if simple changes in the job will solve the problem. The use of in-service training as a possible solution is based on the administrator's conclusions. If the problem is not skill related, the administrator must decide if staff find performance punishing, rewarding, or if obstacles to performance exist and take other-than-in-service actions to solve the problem.

Using Mager's strategy with each perceived training gap, the administrator compiles a list of identified problems to be addressed through the use of in-service training. The length of the list and the critical nature of the items on the list dictates the resources allocated to the development of in-service training curriculums.

Some facility administrators have access to training gap information gathered by their state association of rehabilitation facilities, state vocational rehabilitation agency, or county office of social service. Data from these other-than-facility assessments is best used to prompt areas for facility investigation as it may not be competency based. This information therefore, should be used to provide a starting point for the facility to determine individual needs.

An example of a useful but not competency based information gathering attempt was conducted in Iowa to determine staff opinions of their training needs. Produced jointly by the Iowa Association of Rehabilitation Facilities,* the Iowa Association of Private Residential Facilities for the Mentally Retarded,* and the Iowa University Affiliated Facility, this survey gathered data from Iowa facility staffs to determine opinions of training needs that could be then used by the cooperating organizations to develop a resource clearinghouse and update training packages. Data was gathered by mailing and tabulating a survey questionnaire. The survey form (see Appendix A) requested that each respondent react to need areas with a numerical answer:

1 = information we need
2 = the information would be nice, but not essential
3 = no need for training in this area
4 = not applicable to our agency

When the surveys were returned, the numerical scores were tallied resulting in a frequency for each of the four rating categories. Further processing created a mean score for each subject area. These means were used to compare each training need topic area with others. For example, administrators ranked their need for "Orientation to Advocacy" training higher than their need for training in "AC/MRDD Accreditation," since their mean score was 7 for the former, but 6 for the latter (see Appendix A).

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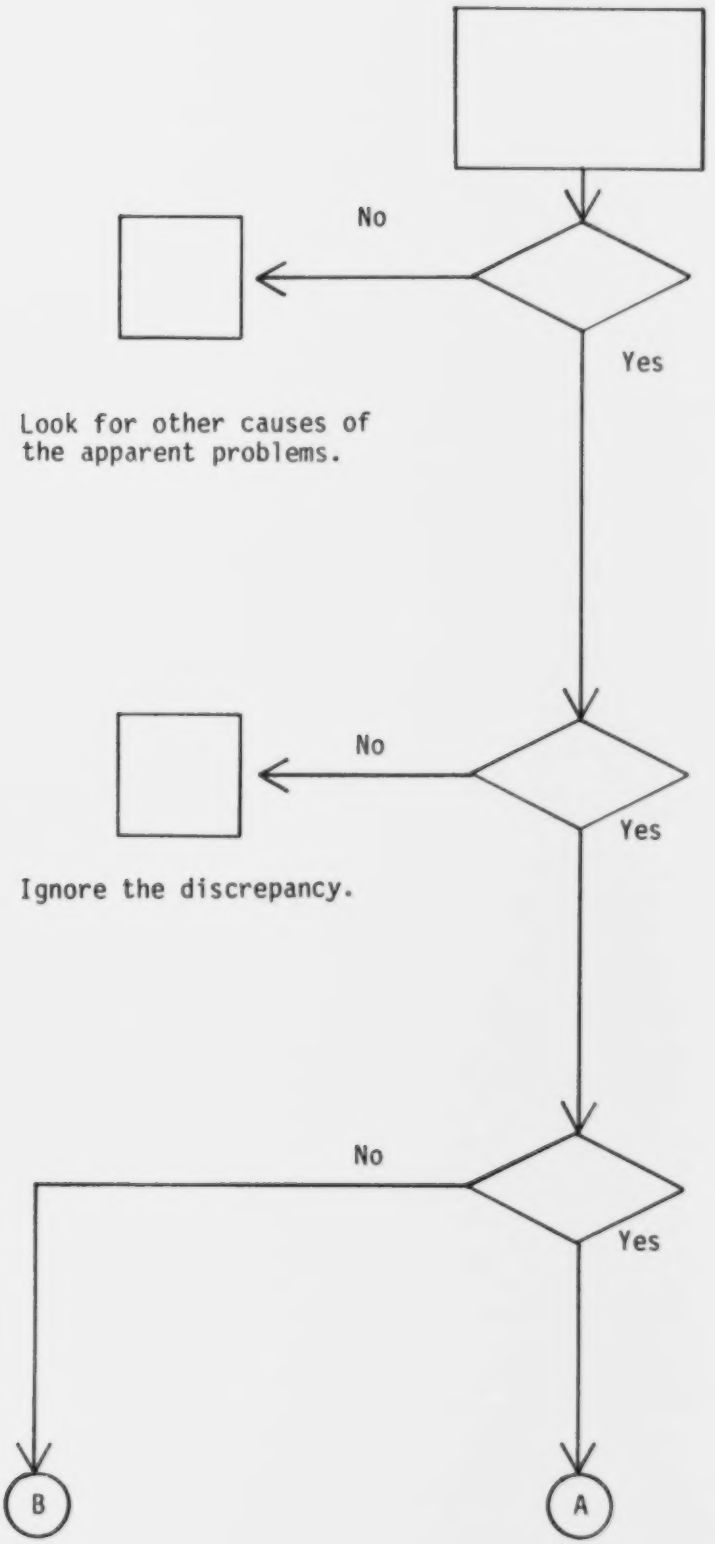
*These groups have consolidated to form the Iowa Association of Rehabilitation and Residential Facilities.



He isn't doing what he should be doing. I think I've got a training problem.

DOES A PERFORMANCE DISCREPANCY EXIST?

Why do I think there is a training problem?

What is the difference between what is being done and what is supposed to be done?

What is the event that causes me to say things aren't right?

Why am I dissatisfied?

IS IT IMPORTANT?

Why is the discrepancy important?

What would happen if I left the discrepancy alone?

Could doing something to resolve the discrepancy have any worthwhile result?

IS IT A SKILL DEFICIENCY?

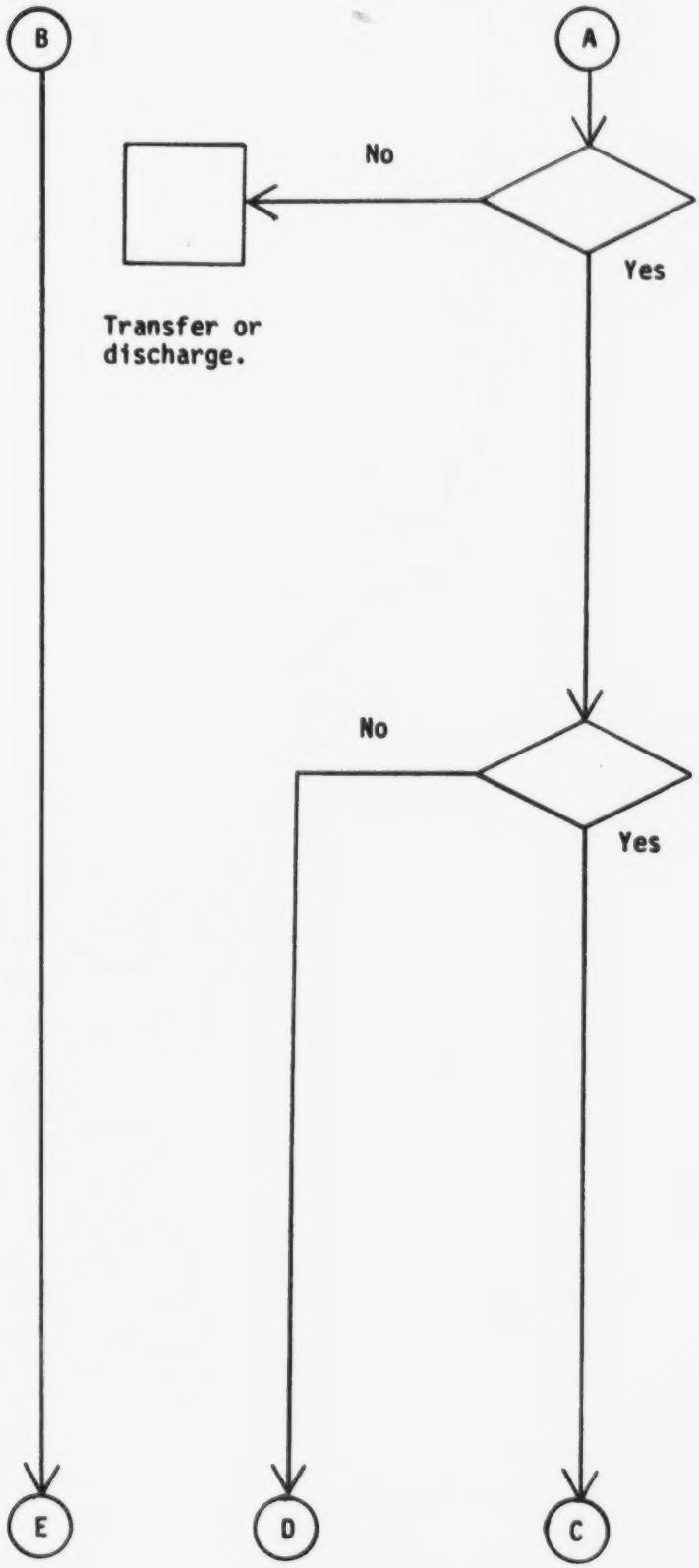
Could he do it if he really had to?

Could he do it if his life depended on it?

Are his present skills adequate for the desired performance?

Figure 2: Analyzing Possible Training Problems

From Analyzing Performance Problems by Robert Mager and Peter Pipe, copyright ©1984 by Pitman Learning, Inc., Belmont, CA 94002.



DOES HE HAVE WHAT IT TAKES?

Did he once know how to perform as desired?

Has he forgotten how to do what I want him to do?

Could he learn the job?

Does he have the physical and mental potential to perform as desired?

Is he over-qualified for the job?

IS THERE A SIMPLER SOLUTION?

Can I change the job by providing some kind of job aid?

Can I store the needed information some way (written instructions, checklists) other than in someone's head?

Can I show rather than train?

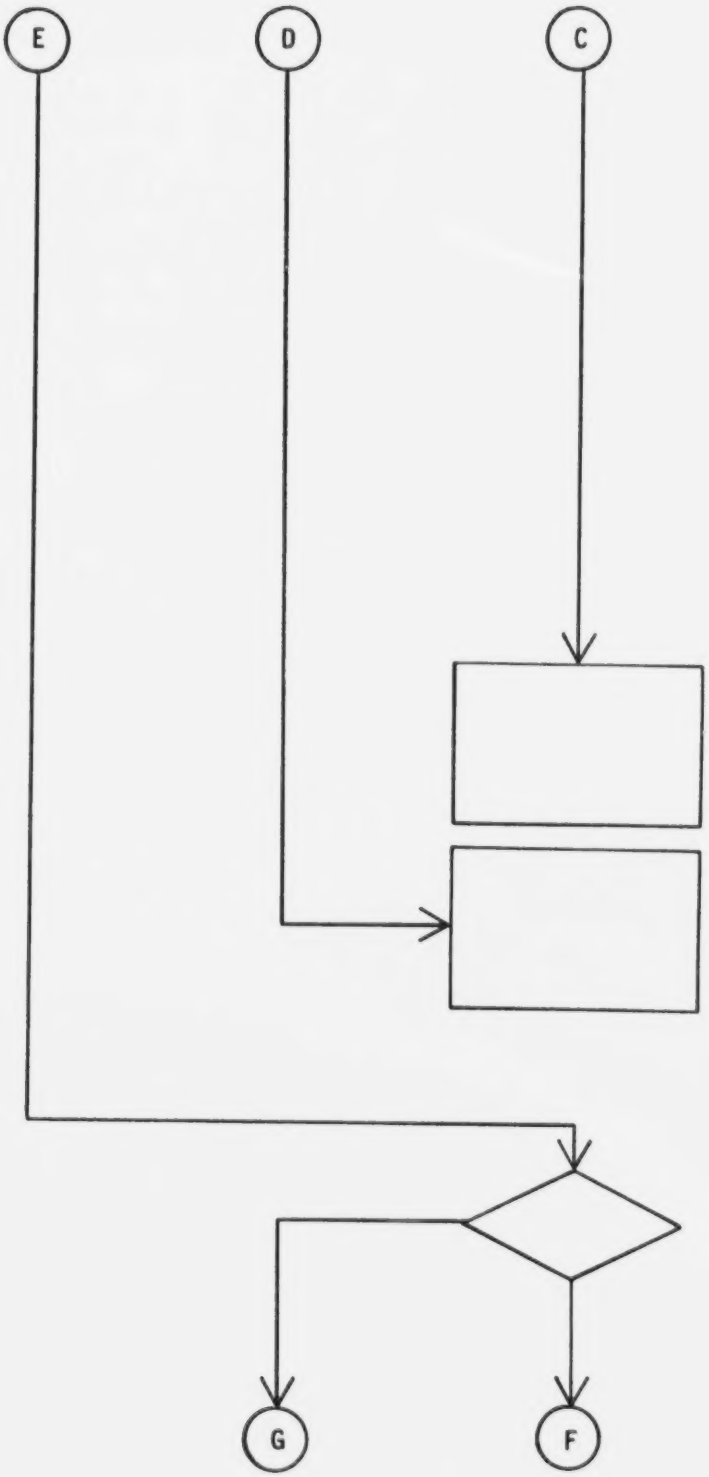
Would informal (i.e., on-the-job training be sufficient?

Are any solutions inappropriate or impossible to implement?

Are any solutions plainly beyond our resources

What would it "cost" to go ahead with the solution?

Figure 2: continued



What would be the added "value" if I did?

Is it worth doing?

What remedy is likely to give us the most result for the least effort?

Which are we best equipped to try?

Which remedy interests us most? (Or, on the other side of the coin, which remedy is most visible to those who must be pleased?

Implement other than training remedy to the performance problem.

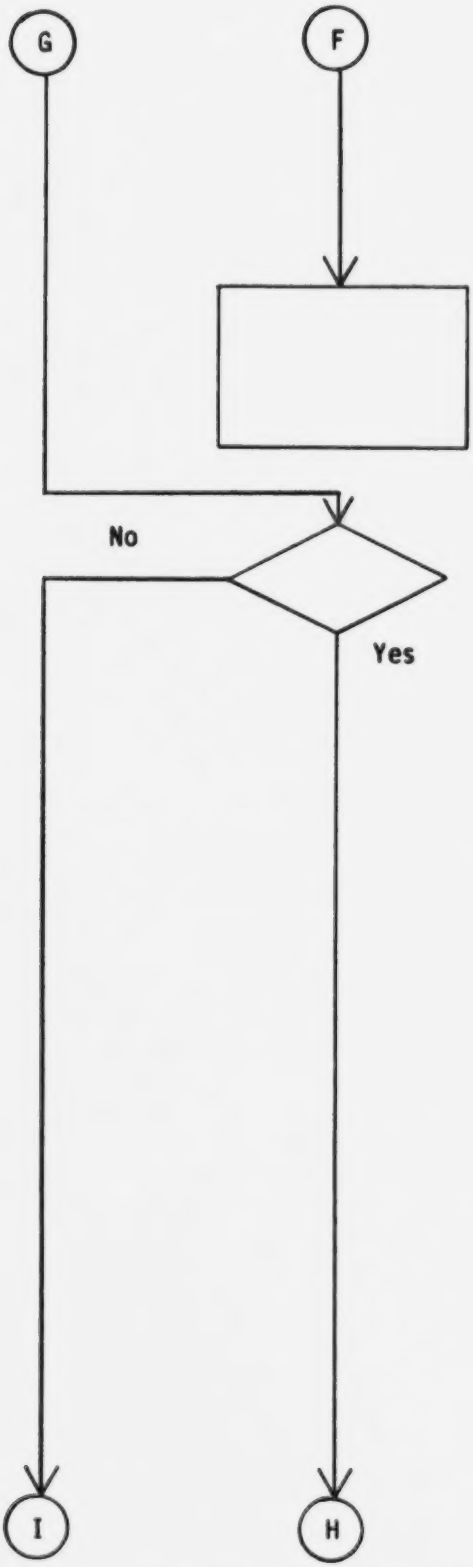
Commit to training and begin investigation of program development.

IS DESIRED PERFORMANCE PUNISHING?

What is the consequence of performing as desired?

Is it punishing to perform as expected?

Figure 2: continued



Does he perceive desired performance as being geared to penalties?

Would his world become a little dimmer (to him) if he performed as desired?

Remove punishments.

IS NON-PERFORMANCE REWARDING?

What is the result of doing it his way instead of my way?

What does he get out of his present performance in the way of reward, prestige, status, jollies?

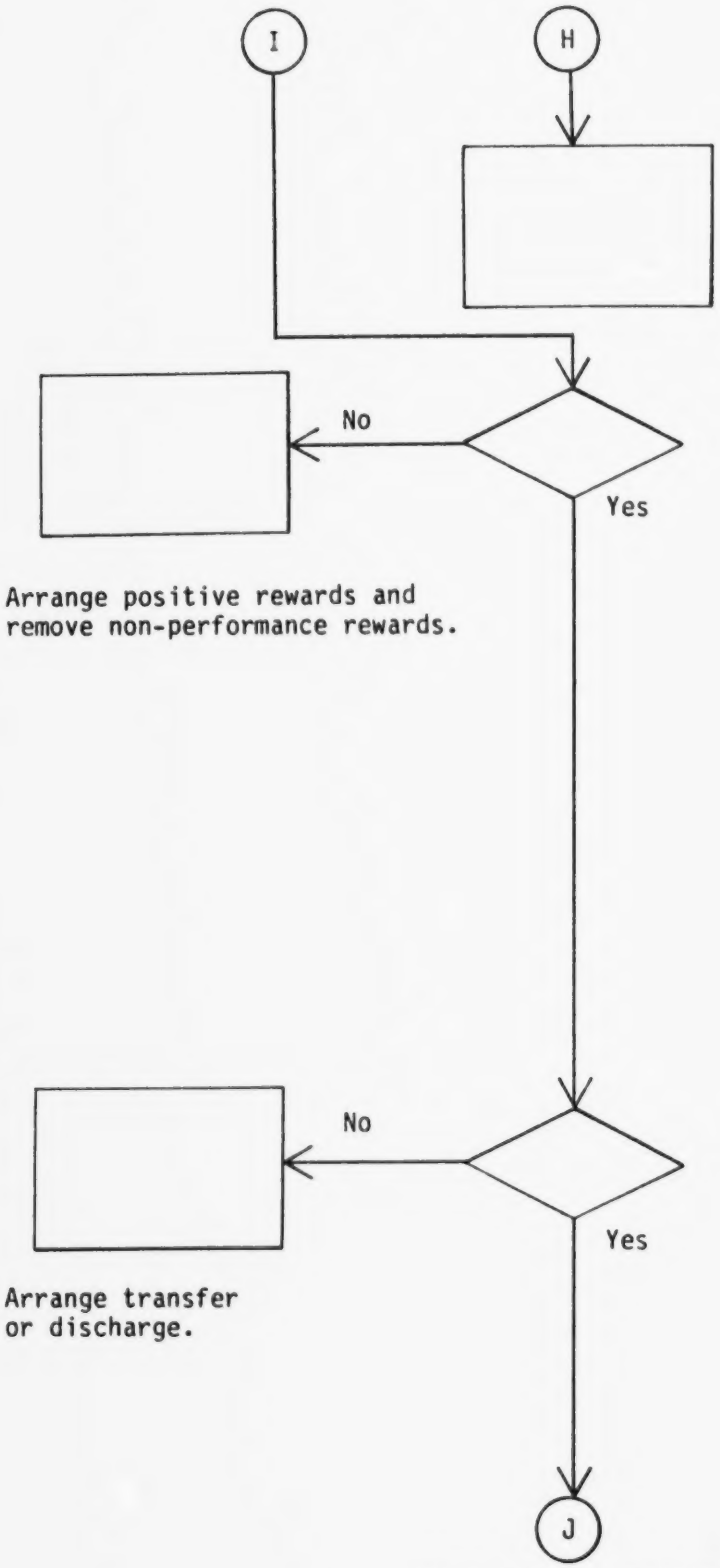
Does he get more attention for misbehaving than for behaving?

What event in the world supports (rewards) his present way of doing things? (Are you inadvertently rewarding irrelevant behavior while overlooking the crucial behaviors?)

Is he "mentally inadequate," so that the less he does the less he has to worry about?

Is he physically inadequate, so that he gets less tired if he does less?

Figure 2: continued



DOES PERFORMING MATTER?

Does performing as desired matter to the performer?

Is there a favorable outcome for performing?

Is there an undesirable outcome for not performing?

Is there a source of satisfaction for performing?

Is he able to take pride in his performance, as an individual or as a member of a group?

Does he get satisfaction of his needs from the job?

ARE THERE OBSTACLES TO PERFORMING?

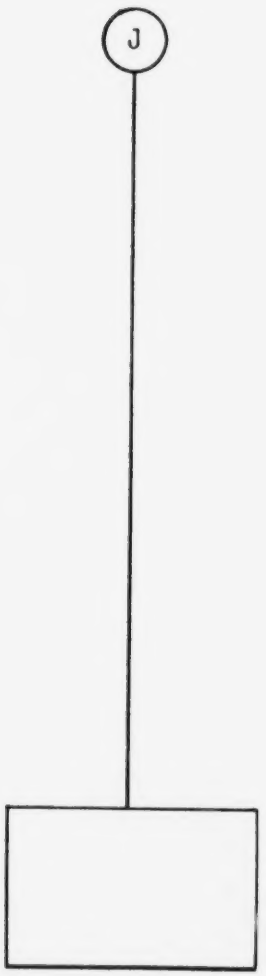
What prevents him from performing?

Does he know what is expected of him?

Does he know when to do what is expected of him?

Are there conflicting demands on his time?

Figure 2: continued



Does he lack the authority?
...the time?
...the tools?

Is he restricted by policies or by a "right way of doing it" or "way we've always done it" that ought to be changed?

Can I reduce interference by improving lighting?
...changing colors?
...increasing comfort?
...modifying the work position?
...reducing the visual or auditory distractions?

Can I reduce "competition from the job" - phone calls, "brush fires," demands of less important by more immediate problems?

Remove obstacles to performance.

Figure 2: continued

DEVELOPING AN IN-SERVICE TRAINING PROGRAM

After discovering a staff related performance problem and establishing that the problem may be eliminated by providing in-service training, facility administrators must begin program development. Figure 3 presents a development path for the starting of an in-service training program and shows the cyclical training path that allows programs to be responsive to changing facility needs for training. The cyclical path results from "feedback loops" at two points. First, after assessing the facility's need for in-service training, a negative answer to the question - "Do gaps in proficiency exist at the present time?" - results in further needs assessment. Periodic assessments of training needs allow the facility to continuously update the training provided. Second, following the evaluation of the completed program, the entire process returns to the selection of objectives for the next series of presentations. This takes place even if the evaluation of the program discovers no need to make significant modifications. In effect, the evaluation of the program helps to identify gross problems and the reconsideration of program objectives allows the entry of new materials.

Effective staff in-service training, therefore, moves from the determination that training is needed, to curriculum development and implementation, to evaluation and redevelopment. New programs are developed on the basis of evaluation data and the periodic gathering of training need data. A cyclical training path results to serve facility in-service needs for many years.

The U.S. Army (1967) created a development strategy aimed at providing training for precise duties, reducing the number of instructors required to conduct training, shortening training time, and lowering overall operating costs. Drawn from that strategy, this publication expands and adapts the concepts found in the Army's Instructional Development Manual to meet rehabilitation facility in-service training needs for time and dollar effective programs. This publication presents 10 steps in the development of an in-service training program:

1. Commit the facility to staff training.
2. Select training objectives.
3. Write performance objectives.
4. Set course prerequisites.
5. Select and sequence course content.
6. Construct competency tests.
7. Select an instructional method.
8. Determine instructor requirements.
9. Select and prepare training aids.
10. Determine equipment requirements.

These ten steps (see Figure 3) proceed through a logical sequence to arrive at the presentation of an in-service program. This chapter provides information on each of the ten steps to allow program developers to produce an in-service program uniquely tailored to their facility. The final steps of evaluation and change indicated in Figure 3 are covered in Chapters Three and Four.

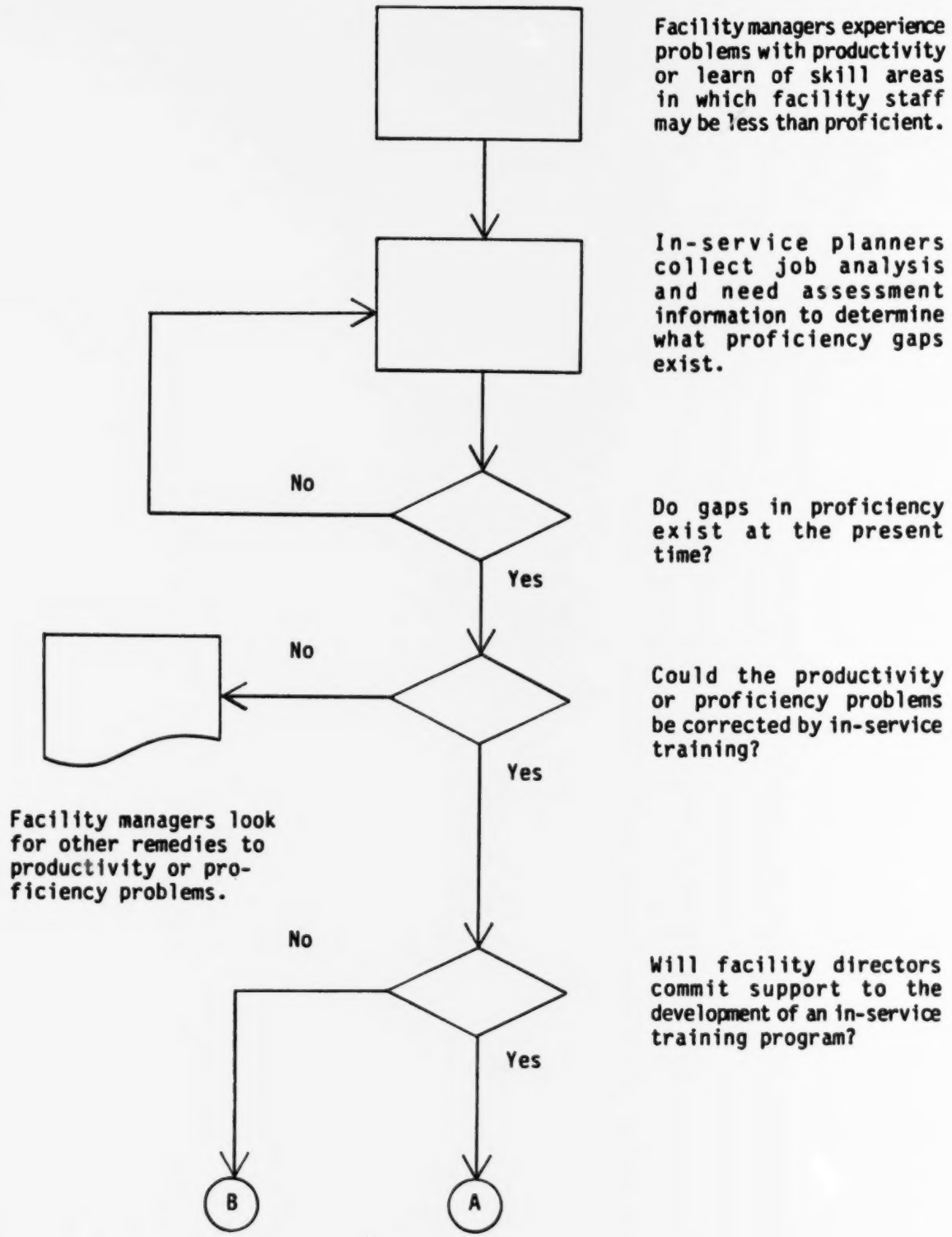

Facility managers experience problems with productivity or learn of skill areas in which facility staff may be less than proficient.
In-service planners collect job analysis and need assessment information to determine what proficiency gaps exist.
No
Do gaps in proficiency exist at the present time?
Yes
No
Could the productivity or proficiency problems be corrected by in-service training?
Yes
Facility managers look for other remedies to productivity or proficiency problems.
No
Will facility directors commit support to the development of an in-service training program?
Yes
B
A

Figure 3: Starting a Training Program; a Flow Path

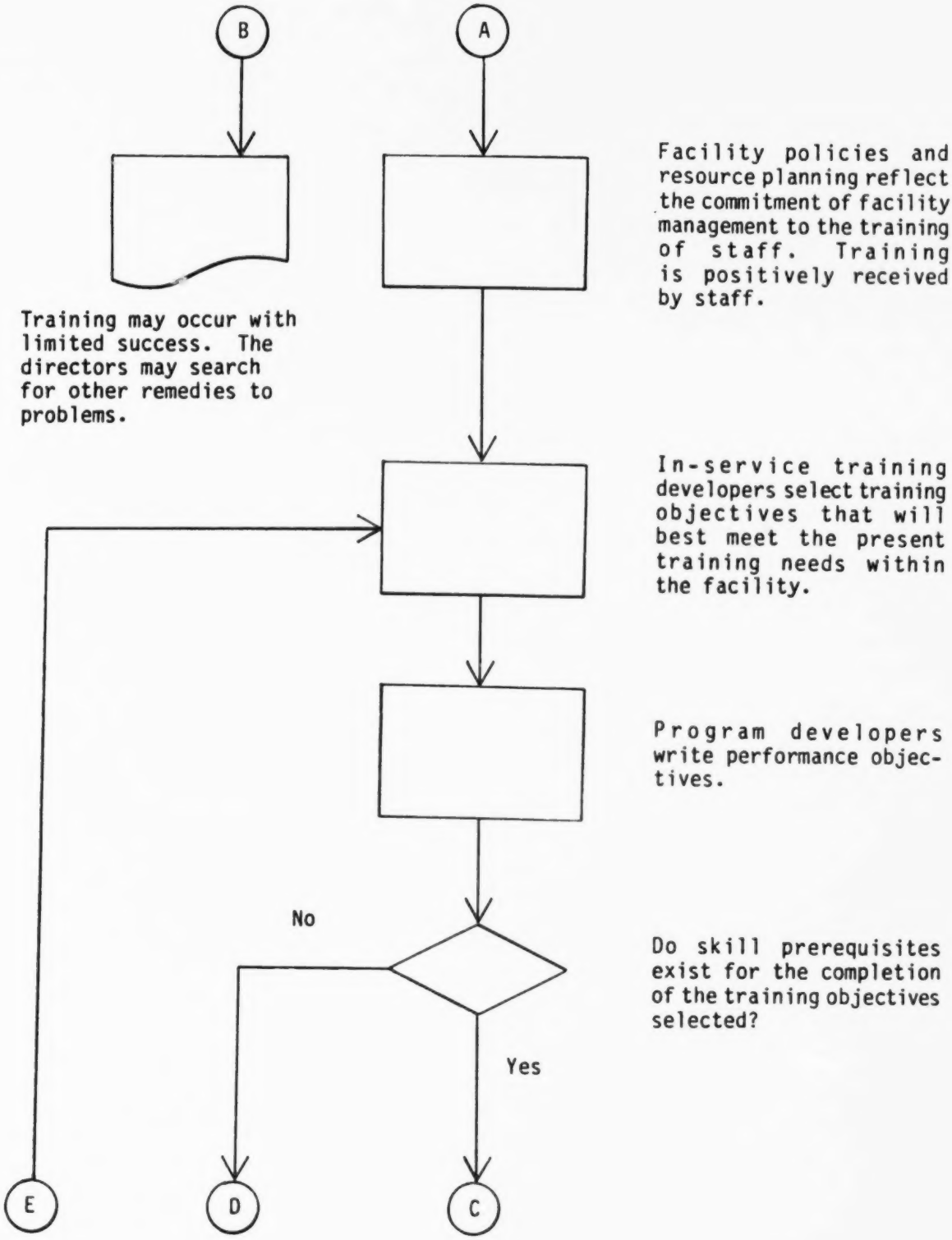

B
A
Training may occur with limited success. The directors may search for other remedies to problems.
Facility policies and resource planning reflect the commitment of facility management to the training of staff. Training is positively received by staff.
In-service training developers select training objectives that will best meet the present training needs within the facility.
Program developers write performance objectives.
No
Do skill prerequisites exist for the completion of the training objectives selected?
Yes
E
D
C

Figure 3: Training Program Development Flow Path, continued

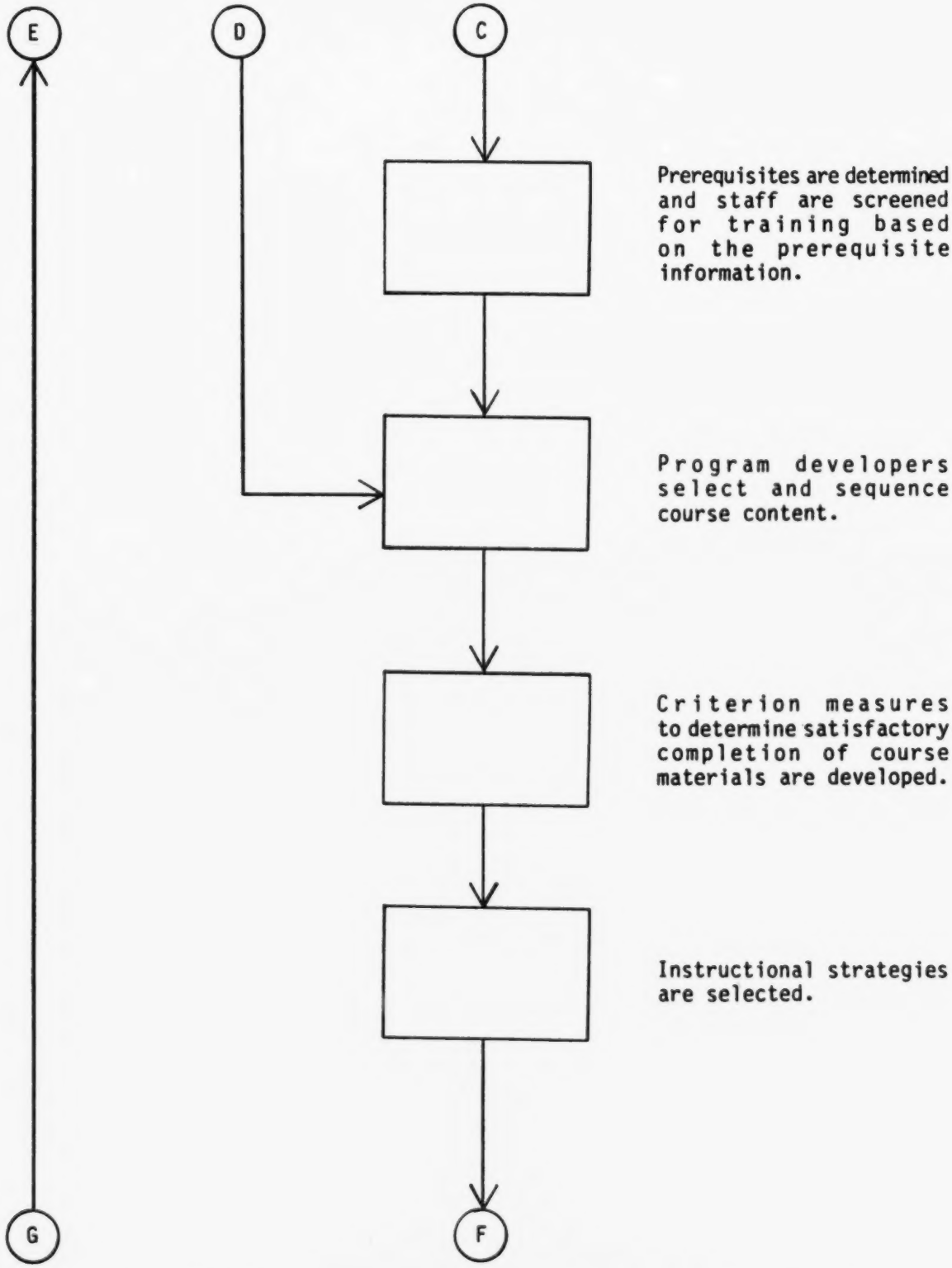

E
D
C
Prerequisites are determined and staff are screened for training based on the prerequisite information.
Program developers select and sequence course content.
Criterion measures to determine satisfactory completion of course materials are developed.
Instructional strategies are selected.
G
F

Figure 3: Training Program Development Flow Path, continued

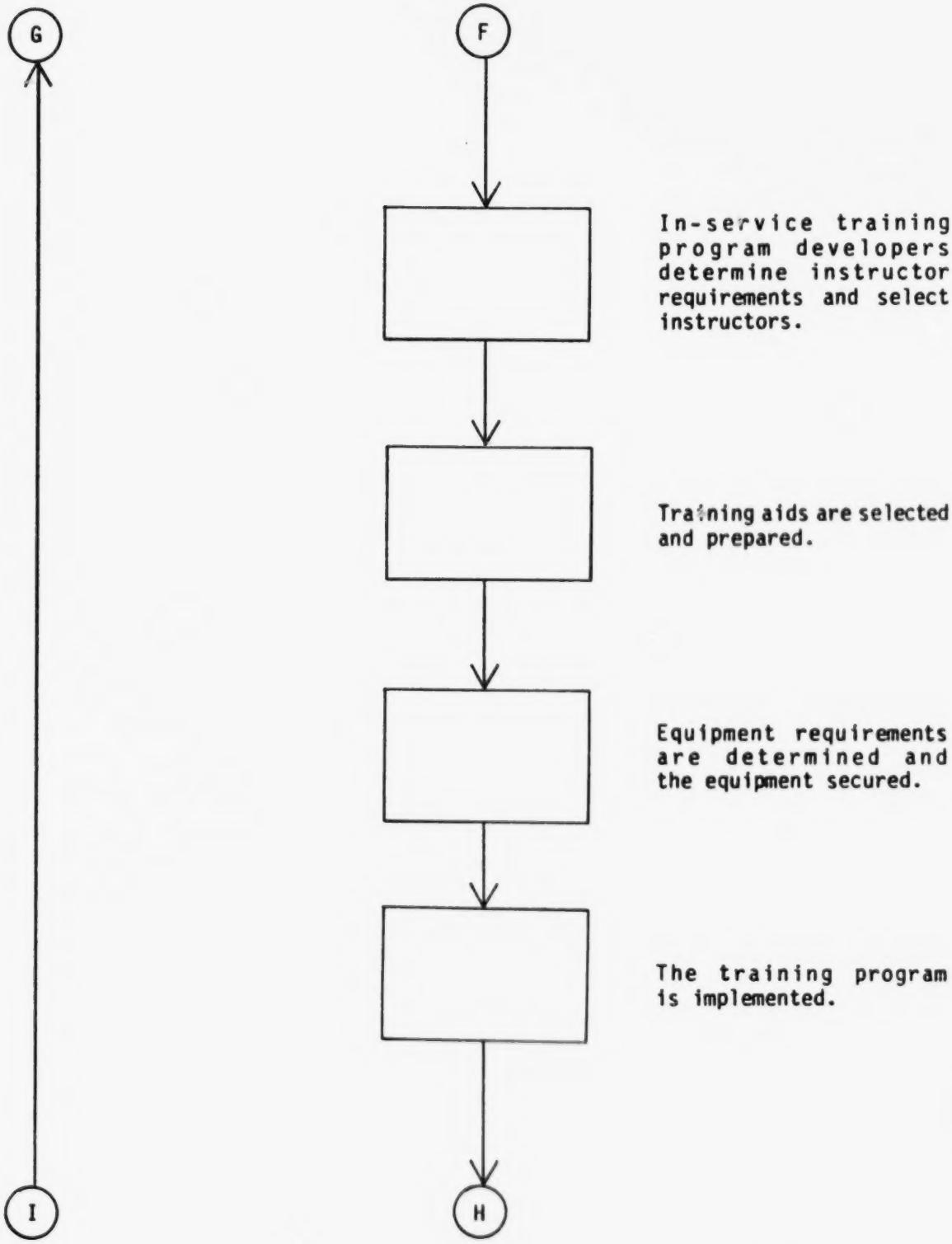
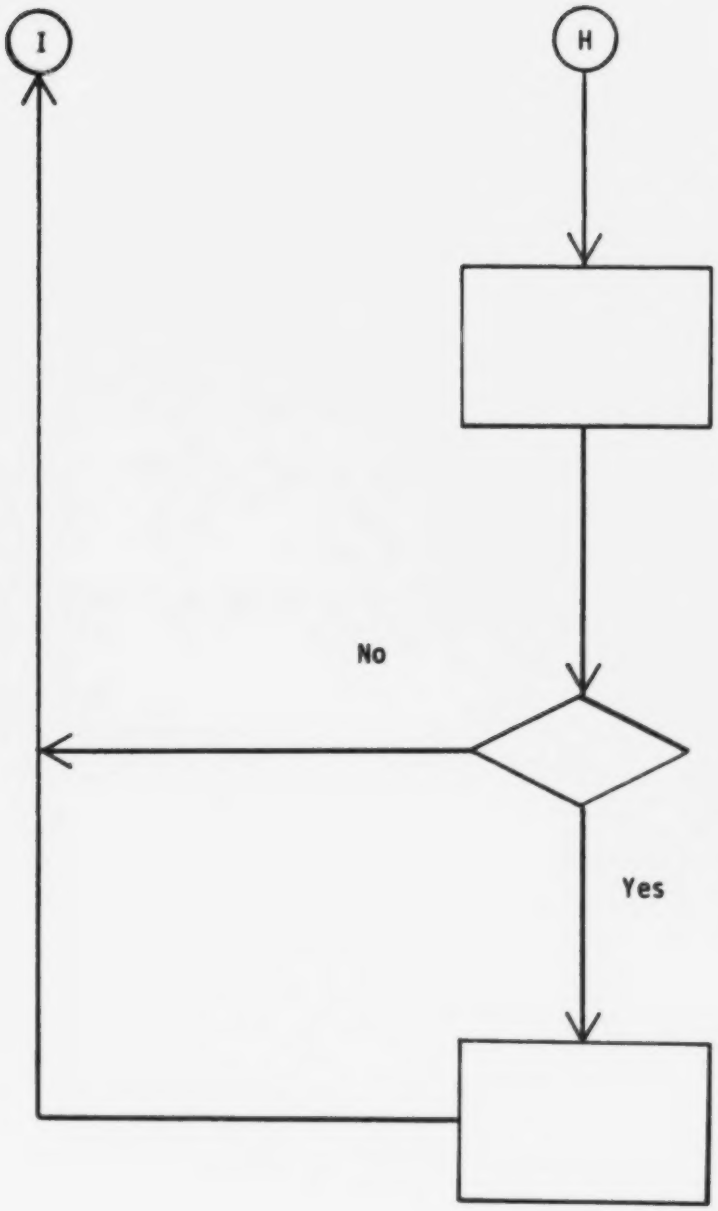

G
F
In-service training program developers determine instructor requirements and select instructors.
Training aids are selected and prepared.
Equipment requirements are determined and the equipment secured.
The training program is implemented.
I
H

Figure 3: Training Program Development Flow Chart, continued



The training program is evaluated by analyzing test results, following up on in-service participants, and evaluating the instructional system.

Does the evaluation indicate that changes should be made in the training program to increase its effectiveness or efficiency?

Modifications are made to any area of the program that evaluation indicated could be strengthened by changes.

Figure 3: Training Program Development Flow Path, continued

Commit the Facility to Staff Training

The first step in the development of a staff in-service training program is administrative commitment to providing in-service training. To receive staff support, in-service training must be perceived as a valuable activity. For facility staff to perceive training as valuable, they must know that it has definite administrative commitment and see evidence that the training produces results. To show full commitment to training, administrators should ensure that the agency personnel manual addresses staff training and outlines the main areas of training that will be provided. In addition, job descriptions should include statements requiring staff participation in training activities and the facility's personnel file should include information on the completion of in-service training activities. Facility budgeting processes should allow input from staff training personnel and should allocate sufficient funds to meet facility determined training objectives. When dollars are allocated to training, staff receive a message that training is important. Incentives and motivations for active staff participation in training programs should be devised and provided.

To aim the facility in the direction of strong in-service program development, administrators must develop a strong staff training policy. The policy should be written around statements that:

* relate training to meeting facility goals.
* state facility commitment to human growth.
* describe the facility method of training need assessment.
* state that identified needs will not jeopardize job security.
* state that evaluations will be based on the evaluation of job performance not the evaluation of training performance.
* identify training resources as a line item budget category.
* specify who will be trained.
* state the general scope and any restrictions on training activity.
* describe relationships with any other training organizations. (Planning, Conducting, and Evaluating Workshops. Davis, Larry Nolan. Learning Concepts, Austin, Texas, 1974. Distributed by University Associates, San Diego, California.)

Select Training Objectives

After identifying areas where training is needed and committing the facility to provide training, program developers select objectives. Although the selection of objectives is based on the following criteria, all criteria need not be met to include a task in the list of training objectives; meeting a single criterion may be sufficient justification for training.

Universal application

The universal application of a job task emphasizes the development of job skills used by staff wherever they work in the facility. For instance, knowledge of fire escape routes is required for all staff in the facility. To consider if a task meets the criterion of universality, ask the questions:

a. Where is this skill or knowledge used? In which positions?
b. Does it have wide application? (If it occurs only in a few locations, it may be an appropriate objective for selective training of some type).
c. Is it so unique that it is infrequently found in the facility positions?

Difficult to learn independently

If the skills of a required task are so difficult to learn that staff will not be able to acquire them on their own, they may be candidates for training. For example, although staff could learn to observe client work behaviors on their own, it would be a lengthy trial-and-error process. Danger to staff or hazard to equipment may also cause a task to meet the criteria of difficulty and, therefore, be included in a training program. The following questions may help identify difficult tasks:

a. Is the skill or concept difficult to acquire?
b. Are staff likely to learn this skill on their own with minimum danger to themselves, equipment, or clients?

Crucial to acceptable job performance

Essential skills for acceptable job performance, even though not performed frequently, are candidates for training under the criterion of cruciality. For example, training staff in cardiopulmonary resuscitation (CPR) is often included in training programs because of its crucial nature. The possibility that a staff member would need to use CPR is remote. However, there may be a time when CPR skills are extremely critical. Immediate knowledge of CPR may be necessary to avoid a person's death. The critical nature of the infrequently used skill is so great that the training must be provided. To determine if a task is crucial to job performance, ask the following questions:

a. How important is the skill when it is called for?
b. What is the impact on mission, the facility, the service, the client, or the staff when the required skill is not present?

Frequent use

A frequently used skill is desirable to be taught to staff using in-service programs. It may be more economical in time and materials to teach a skill rather than to allow staff to learn it by trial and error. Providing instruction can also result in standardized performance for service provision. Frequently used skills can be identified by asking the following questions:

a. How often must the staff perform this task?
b. Is it done often enough to warrant training?
c. Is there a "best way" to do it?
d. Should the method of performing the skill be standardized?

Economically feasible

The selection of objectives includes a determination of whether the time and money required for training offset the increases in job proficiency attained by staff. If the proficiency of staff receiving in-service training is only slightly higher than that of staff not receiving training, in-service training is not needed. Training must result in a significantly higher level of performance or a measurably greater degree of skill than could be attained otherwise. For example, training in writing objectives is a skill suitable for acquisition through in-service training. However, there is a point where further investment in training results in little improvement in objective writing skill. To continue training beyond this level would result in investing more than the anticipated gains are worth.

Achievable

Training objectives must be achievable within satisfactory time periods. Objectives must be comparable with the abilities and aptitudes of the staff, as well as with the requirements of the job. It is counter-productive to set standards of accomplishment that are unreachable by many staff. To aid in the determination that the objective is achievable, ask the following questions:

a. Can the majority of staff meet the standard prescribed by the objective?
b. Do staff have the aptitude, intelligence, maturity, motivation, or experience required to attain the desired standard?
c. Can staff achieve the standard in a reasonable period of time?

Emphasize average competence

Training components are selected which are more useful to staff of average proficiency than to those demonstrating mediocre or outstanding proficiency in the job. Training staff for less proficiency than the job requires will not allow the training to meet facility needs. It is a waste of facility resources to train staff in skills or characteristics of only outstanding performers. The investment of training resources requires that developers ask the following questions:

a. Is this skill required?
b. Is this level of proficiency demonstrated by average performers?

Frequently deficient skills

Some tasks are more difficult to accomplish than others. Through needs assessment those tasks which are frequently mentioned as being deficient can be identified. These tasks can be earmarked for inclusion as training objectives. For example, if client maladaptive behavior incidents are frequently seen to be caused by inappropriate staff interventions, appropriate interventions might be a desirable training objective. Ask the following questions to help identify frequently deficient skills:

a. What tasks are frequently performed poorly by staff?

b. Which tasks require emphasis due to mistakes made by many staff?

Retention of Skill Over Time

The time interval between completion of training and use of the skill on the job must be considered when choosing objectives. The degree to which a skill degenerates through nonuse, and the time over which the deterioration takes place is considered when deciding to provide training. The amount of emphasis, practice, and maintenance training required for retention of the skill at the required level is important. For example, the ability to evaluate vocational potentials is relatively difficult to acquire. If the skill is only rarely used, it may be wise to train only a few evaluators. However, if a decision is made to train all vocational staff as evaluators, higher levels of initial proficiency in evaluation will be required to absorb the deterioration of the skills which is certain to occur.

Write Performance Objectives

After selecting training objectives, they are written in a form permitting the development of efficient programs. Often objectives worded "to provide staff with a general knowledge of...," or a "working knowledge of...," or an "understanding of..." are open to several interpretations and do not provide the data needed to develop instructional materials or construct competency measures. Objectives describe (1) the tasks that staff must perform, (2) the conditions under which they must perform, and (3) the standard of acceptable performance. A useful objective states clearly a desired action. The objective, then, is a description of performance which will be interpreted in the same manner by all concerned with planning and conducting training activities. To provide a common base of interpretation for many readers, vague words such as "know" or "appreciate" are avoided in favor of more explicit terms. Clear objectives require action-framed statements which draw a picture of staff performance after training. Examples of vague terms are listed in Group 1 and clearer expressions in Group 2 below:

Group 1: Vague Terms	Group 2: Behavioral Terms
To provide a general knowledge....	To evaluate....
To provide a working knowledge....	To administer....
To qualify....	To adjust....
To know about....	To modify....
To understand....	To classify....
To develop an appreciation....	To instruct....
To be familiar with....	To construct....
To orient...	To select....
To rearrange...	To differentiate....
To organize...	To assemble....

Clear terms identify exactly what staff must be able to do at the end of a training program. Because the material learned allows for the application of speccific knowledge or the demonstration of a skill, clear descriptions, identify: (1) what staff will be given to do the job (tools, equipment, job aids, references, materials), (2) what they will be denied (tools, equipment,

etc.), (3) what assistance they will have if any, (4) what supervision will be provided, and (5) the physical environment in which they must perform (climate, space, light, etc.). Clear descriptions state how well staff must be able to perform. Standards establish the minimum performance requirements for a job. To do this, the objective statement must state the necessary quality of work in terms of accuracy, completeness, clarity, tolerances, etc. In addition, the quantity of work produced (where applicable) and the time allowed to complete the job can also be described.

Clear performance objectives are the foundation for the development of in-service programs. They also serve other administrative and training purposes. Some of the more important uses of performance objectives are:

Enhance the selection of appropriate course content.
Permit the selection of instructional strategy.
Help meet training goals.
Help determine competency measures.
Establish standards for training.
Provide an objective basis for evaluating the in-service instruction.
Help evaluate staff performance on the job.

Performance objectives form the topic areas included in an in-service program. They clearly describe what content is pertinent and, thus, simplify the process of selecting the instructional method to be used.

Performance objectives permit both the instructor and staff to know precisely what is required of staff at the end of training. This knowledge prevents gaps and unnecessary duplication in instruction, enhances motivation, and makes learning more effective. This also leads to simplification of the construction of tests. Clear performance objectives allow competency levels to be established and lead the program developers to set passing criteria.

Performance objectives help program evaluators determine if training has been effective by clearly stating what instruction should accomplish. This permits objective evaluation of the instructional program. In addition, performance on the job can be effectively measured with the firm and objective standards provided by performance objectives.

Steps in writing performance objectives

Identify performance objectives.
State required conditions.
State the criterion of acceptable performance.

Performance objectives describe observable actions. While knowledge, skill, and attitude all contribute to any observable actions, these elements must be recognized as components of the desired actions rather than the actions themselves. Performance objectives, therefore, are statements which describe behaviors established through training and can be seen and measured after training. Statements written in this manner assist in program planning and final evaluation.

Examples:

(a) "To develop an understanding of the Bennet Hand Tool Work Sample." This statement does not picture learned behavior. Rather than describing a learner doing something, it vaguely states an abstract state of mind which somehow relates to the work sample. If we attempt to describe the real desired performance we might state that the learner must be able to "identify the procedure for observing a client on the Bennet Hand Tool Work Sample."

(b) Another vague approach to the statement of training requirements is the use of such statements as: "Staff must have a working knowledge of behavior modification." Although "working knowledge" contains an implication that some acts are to be performed, the statement does not provide data to describe these actions. We are left to ponder if the working knowledge is equated to an ability to write behavior modification objectives or to an ability to list the characteristics of behavior modification. A clear objective pictures staff doing something with behavior modification as a result of instruction, as opposed to leading into some vague intellectual state.

Another essential part of an objective statement is the specification of conditions ordinarily present in the job setting and are directly associated with the completion of the task. Conditions are environmental factors such as extremely high or low temperature levels, humidity, light, or location, etc. Associated factors may include such things as tools, references, guides, and supervision or assistance received. Some specific examples of conditions related to performance are:

"Given performance evaluation X...."
"Given standard behaviors...."
"Given a behavioral outburst Z....."

Example:

"Staff must be able to write the ten basic steps in completing a task analysis." Will staff provide this information from memory, or will they be able to use notes, a chart, or a technical bulletin? The statement is not clear because the conditions have not been specified. Consider this improved statement: "From memory, the staff member must be able to list in writing the ten steps in completing a task analysis."

After required behavior and conditions of performance are described, the objective should state the degree of performance the learner must be able to exhibit. The objective must state the standard of acceptable performance in words that describe minimum acceptable performance, set a time limit where appropriate, or define quality and/or quantity standards for the work product or service produced. Some statements are:

Within 2 minutes....
Without error....

100% correct....
At least eight out of ten....
Each of the five principles....
All of the following....
To a tolerance of....
The exact techniques of....
In accordance with procedures defined in....
To the standards defined in....

Example:

"From memory, staff must be able to list and define in writing the characteristics of a grand mal seizure." What is acceptable performance here? How many characteristics are there? How many must staff list and define? How is the adequacy or accuracy of the definitions checked? The objective does not provide answers to those questions. Consider this improved statement: "From memory, staff must be able to list in writing four of the five characteristics of a grand mal seizure and define these characteristics as set forth in pages 5 and 6 of the agency first aid manual."

Although it is possible to write a single statement which incorporates the three essential parts of a true performance objective, it is permissible to write clear objectives by physically separating the three parts.

Select Course Prerequisites

After performance objectives have been clearly described, development staff determine prerequisites. Prerequisites are descriptions of the pre-training knowledges which staff must possess to benefit from an in-service program. Prerequisites are a prediction of the aptitudes, knowledge, skills, and experience required for successful program completion. They may be applicable to all in-service courses or to specific courses of instruction. Prerequisites are established to ensure that the in-service training programs are satisfactorily completed by those staff selected for training. A list of prerequisites can serve as the starting point in collecting data about staff. This list helps assure that the data required for objective evaluation is obtained. Prerequisites can also serve instructional purposes. Instructors can use prerequisite lists in planning their sessions and developing instructional materials. The aptitudes, abilities, and experiences of staff have a direct bearing on the selection of appropriate instructional strategies and the development of instructional materials. To plan adequately the instructor must have accurate information about the characteristics of the typical staff member. The trainer needs to know what the staff already knows prior to training and a list of prerequisites supplies that data.

Select and Sequence Program Content

Staff training programs are developed around two basic facility needs:

The need to provide training that will help avoid problems and the need to provide training that will correct problems.

Most facilities orient new staff using problem avoidance training. Expanded sessions may be held on a periodic basis and include established staff for sections that convey new facility information. Orientations may also include basic training in skills needed by facility personnel using "turnover notebooks" or "position operating manuals." Other problem avoidance programs may be specially scheduled when new processes are introduced into the facility. An effort to achieve accreditation or new requirements passed by third party payers may lead to special training programs. Facilities also provide avoidance training to staff needing knowledge of vital but little used skills such as basic first aid, cardiopulmonary resuscitation, and client management techniques vital to the welfare of the client population.

Training to avoid problems is usually training that can be planned and scheduled in advance. The facility can plan avoidance training sessions to coincide with fiscal plans and thus control the expense encumbered for the training. This is not always true of the second type of training situation, the need to provide training to correct problems.

Many first-time in-service training programs are developed in response to the identification of staff problems. Some administrators rush into staff training to solve their staff problems and fail to adequately develop their training programs. Strategically developed through needs assessment data and following the process outlined in this publication, these problem correction programs can be incorporated into the facility planning process. This gives facility administrators control over potential problems and allows problem correction to be a planned expense category in the in-service budget.

The facility's in-service program will have contents reflecting both problem avoidance and problem correction. Developers must select the content of their instructional units and then arrange the contents in the best order for learning. Although the processes of selecting and sequencing content are closely related and interwoven, each process will be discussed separately.

Content selection

The following items are important when selecting course contents:

(1) The information to be included should be recent.
(2) The information to be presented must represent an approved facility position.
(3) The content must be directly related to performance.
(4) The content must be critical to the development of the required job performance.

The program developer uses performance objectives to focus on learning outcomes and identify the "meat" of the program. The supporting materials are selected using these objectives to provide data with which to measure the above criteria. Performance objectives do not make content selection a mechanical process, but do simplify the job.

Course sequencing

Learning is a process built on previously learned data. Changes in staff performance develop gradually. Sequencing is placing program learning experiences in a time reference to produce the most learning in the shortest period of time. Sequencing helps to avoid unnecessary duplication in content. It also helps assure that all skills have been developed before the program is completed.

The sequence of lessons in a program of instruction can be based on job performance order, logical learning steps, or order by ease of learning. Job performance order is the order in which a job is actually performed. Logical learning steps are dictated by the inherent logic of the subject-matter, such as applied first aid. Order by ease of learning provides older learnings as the basis for new learnings and, when possible, staff move from the simple to the complex, the familiar to the unknown, and the concrete to the abstract. All types of sequencing are used in course development. Sequencing decisions are based on the actual content of the training program and must be completed before anything else is developed.

Guidelines for sequencing

a. Place easily learned tasks early in the program.
b. Introduce broad concepts and technical terms which have application throughout the program early in the sequence.
c. Place the application of concepts close to concept introduction.
d. Place requisite skills and knowledges in the sequence prior to the points where they must be combined and applied.
e. Provide for maintenance and review of skills and knowledges which are essential parts of later tasks and duties.
f. Introduce a concept or skill in the task in which it is most likely or most frequently to be used.
g. Don't "overload" any task with difficult-to-learn elements.
h. Provide for redevelopment and practice of required skills and concepts in areas where transfer of identical or related skills is not likely to occur.
i. Place complex or cumulative skills late in the program sequence.

Steps in sequencing

1. Examine each performance objective and develop outlines for each skill component. These outlines must include all of the major skills required to achieve the performance specified. The product of this step is a complete outline of all required learnings including all specific concepts, principles, skills, or values required.

2. Arrange the objectives and content outlines in developmental learning order.

   (a) Lay out the outlines.
   (b) Determine whether each item in an outline should be initially presented within the task where it first appears.

(c) When specific items are obviously interdependent, decide where in the sequence to place the items on the basis of secondary guidelines such as difficulty of acquiring the skill or knowledge, or on the basis of an equitable distribution of difficult learnings among the several tasks.

3. After establishing a tentative sequence, start with the first performance objective and proceed to write a detailed content outline. Each item in the outline is then analyzed and teaching points are developed by making declarative statements about the contents.

4. The final step in sequencing is to examine all of the detailed content outlines and eliminate any unnecessary duplication.

Construct Competency Tests

Using job analysis and need assessment data, competency tests are established to measure training effectiveness. Training objectives define the tasks which the tests measure, specify the conditions of performance, and identify the degree of proficiency which staff must demonstrate for each task. A competency test is derived directly from the objectives and not from lesson plans.

When using training objectives to develop competency tests, ensure that tests measure each objective in the terms stated by the objectives. To show that they have met the objectives, staff must meet or exceed the level of performance required by each objective. As each objective is essential to performance, unsatisfactory performance on one part of the test cannot be compensated by superior performance on other parts. Relative grades or standings are, therefore, meaningless and standards for competency tests should be set in terms of final grades, scores, or levels of performance that are considered "minimum passing" or "minimum qualifying."

Because the competency test includes only those behaviors which have been determined to be relevant to the job, all staff who complete the in-service program should achieve a perfect test score. Practically, however, an in-service average score of 90 percent, with a range from 80 to 100 percent, might be considered evidence that the objectives of the instruction have been achieved. Use the rule of thumb that if 90 percent of the staff receiving training achieve a score of 90 percent or higher, the instructional system is a good one. Although a competency test helps determine that staff are able to complete their jobs, a major benefit is the testing of the instructional system by identifying weak elements and providing data upon which to base modifications to the system.

There are several types of competency tests, each with advantages and limitations. We will discuss the three types most likely to be used by facility in-service programs:

Written objective tests

Written objective tests are printed or duplicated. Staff either mark answers on the test or a separate answer sheet. Questions may all be written, or there may be printed numbers, diagrams, pictures, or other material to accompany test items.

Advantages

(1) Scoring is objective.
(2) Scoring is quick and easy.
(3) The tests can be administered to large groups simultaneously.
(4) The tests can be designed to be self-administering.

Limitations

(1) Paper and pencil tests cannot validly measure all types of behavior.
(2) They are difficult to construct.

Oral objective tests

These tests are similar to written tests in their content and method of administration except that staff talk instead of write.

Advantages

(1) They are easy to prepare.
(2) They are easy to administer.

Limitations

(1) They must be administered to one trainee at a time.
(2) They are difficult to score unless they are short-answer.

Performance tests

Performance tests require staff to demonstrate a sample of the learned task. Scores may be based on time to complete, accuracy of work, quantity of work, or quality of work. A performance test requires staff to use tools or equipment which will be used on the job or simulated tools, equipment, or materials. For example, CPR training requires a performance test on a simulated heart attack victim.

Advantages

(1) The tests can cover the whole job or task.
(2) They are job oriented.

Limitations

(1) They usually cover only a part of a job.
(2) They require more time to administer per item than other types of tests.

(3) They are usually administered individually.
(4) They often require tools, equipment, and materials which add to the problems and expense of administration.
(5) They are difficult to design.

Select an Instructional Method

Proper selection of an instructional method promotes efficiency and effectiveness of instruction more than any other measure. Methods are selected by systematic, objective means to promote efficiency and help assure that objectives are attained. No single best method applies to all learning situations or instructional objectives. Program developers must choose the method most compatible with program objectives, training facilities and resources, and background of the training staff.

Many instructional methods exist. Examples are: lecture, demonstration, conference performance, programmed instruction, study assignment, and coaching, etc. The approach considered to be the most effective and efficient for the attainment of instructional objectives is called a primary method. Supporting methods are approaches which are essential complements to the primary method. Supporting methods help assure the attainment of instructional goals. Alternative methods are approaches used as substitutes when circumstances dictate.

Each instructional method has advantages and limitations. Careful consideration given to advantages and limitations helps select the most effective and efficient method.

Instructional methods

The Lecture Method

Lectures are presentations in which the instructor talks about events, facts, concepts, or principles, explores a problem, and/or explains relationships. Staff participate in lectures as listeners. Lectures are a means of "telling" staff information they need to know. This does not mean that all the talking done by an instructor during a class period is a lecture. The term refers to formal discourse used to achieve an instructional objective. The purpose of a lecture is to provide information. The instructor has data to transmit to staff learners. Appropriate uses of lectures can be to:

(1) Orient staff to policies, rules, procedures, purposes, and resources.
(2) Introduce a task, indicate its importance, and present an overview of its scope.
(3) Give directions on procedures for learning activities.
(4) Present basic material.
(5) Set the stage for a demonstration or discussion.
(6) Illustrate the application of rules, principles, or concepts.
(7) Review, clarify, emphasize, or summarize.

Planned lectures are effective teaching tools when used appropriately. Lecture is the most widely used method of instruction.

Advantages

Saves time.
Permits flexibility of class size.
Does not require rigid space requirements.
Permits adaptability.
Permits versatility.
Permits better control over content and selection.

Lectures save time because the instructor can present more material quickly than by any other method. Class size is limited only by the size of the room that is used. Lectures can be used effectively in any type of training area, requiring only that staff be able to hear the instructor. Skillful instructors modify or adjust material to meet the needs of each program, thereby making it possible to present information differently for staff groups varied by educational level, training, and past experience. Lectures can be used for any in-service task, at any point in a program, and in combination with any other method of instruction.

Disadvantages

Lectures involve one-way communication.
Poses problem in skill teaching.
Appeals mainly to one sense.
Contributes to staff passiveness.
Poses evaluation problems.
Depends on the skill of the instructor.

Instructor prepares and presents material; staff sits, listens, and takes notes. Lectures permit little or no interchange between the instructor and staff. Lectures are not appropriate for skills such as equipment operation. As most learning takes place through the visual sense, and the lecture, even if supplemented by training aids, appeals mainly to the auditory sense, results are likely to fall short of the instructional goal, unless the content is interesting and challenging enough to hold the attention of the class. During a lecture, attention is difficult to attract and retain. Outside disturbances and daydreaming easily distract staff. Most people acquire the ability to appear attentive to lectures, although they may not be listening. Lecturers receive very little feedback. The instructor must be sincere, enthusiastic, and employ effective speaking techniques to maintain staff interest. The success of a lecture depends on the skill of the instructor.

The Conference Method

The conference method uses group discussion to reach instructional objectives. Discussion techniques include questions, answers, and comments from the instructor in combination with answers, comments, and questions from staff.

There are three interrelated types of conferences: directed discussion, training conferences, and seminars. A directed discussion helps staff acquire

the ability to apply facts, principles, concepts, policies, and procedures. The instructor guides discussions in such a way that the facts, principles, concepts, or procedures are clearly articulated and applied. Training conferences pool the knowledge and experience of staff to gain improved knowledge of principles, concepts, policies, or procedures. Topics discussed in training conferences are less likely to have easy answers than the topics in a directed discussion. The instructor elicits contributions from the group based on past experiences. Balanced participation is the goal. A seminar attempts to find answers to questions or solutions to problems. Instructors do not know the best or correct solution. Therefore, the group seeks an answer. The primary functions of the instructor are to describe the problem and to encourage free and active participation.

The conference method is applied to:

(1) Develop imaginative solutions to problems.
(2) Stimulate interest and thinking.
(3) Emphasize main instructional points.
(4) Supplement lectures, readings, or exercises.
(5) Determine if staff understand concepts and principles, and if they are ready to proceed to new or more advanced material.
(6) Prepare staff for the application of theory or procedure.
(7) Summarize, clarify points, or review.
(8) Prepare staff for further instruction.

Advantages

Increases interest.
Increases staff acceptance and commitment.
Utilizes staff knowledge and experience.
Results in more permanent learning.

The opportunity to express views and to hear the opinions of others is stimulating. Interest is high in well-planned conferences because staff actively participate. Participation leads staff to accept the importance and validity of the program content and commit them to the solution proposed or decisions made.

Instructors can make effective use of staff backgrounds, knowledge, and experiences in the conference method. The entire group benefits from the experience and thinking of all staff involved. The learning that takes place is directly related to the participation in the conference. Conferences demand participation and promote better and more permanent learning.

Disadvantages

Requires highly skilled instructors.
Requires preparation by staff.
Limits content.
Consumes time.
Restricts size of group.
Requires selective group composition.

The most serious limitation for the use of conferences is the lack of instructors who are capable of conducting discussions. Conferences require resourcefulness, initiative, and ability from instructors. Instructors must be able to guide discussion and:

(a) Keep discussion on track.
(b) Minimize debate over unimportant details.
(c) Relate comments from different people.
(d) Avoid reopening topics already discussed.
(e) Encourage full participation.
(f) Prevent domination by a few staff.
(g) Summarize each topic.
(h) Bring discussion to a close.

Conferences often require advance thinking and study by the participants. Thorough preparation improves the quality of discussion and the outcome of the conference. However, no instructor control exists over the quality of staff preparation. Staff readiness for conference training, therefore, varies.

In-service topics appropriate for discussion are restricted. Manipulative operations, functions, procedures, or introductory material do not ordinarily provide suitable content for a conference. Conferences also take a lot of time. Because of the amount of time needed for conferences they are often ruled out as methods of instruction. Conferences cannot be used effectively with groups larger than 12 to 15 staff because the opportunity for individual participation is too limited. Reticent members will be left out of the discussion and denied learning experiences. A conference group must also possess the proper background, maturity, and motivation to profit from discussion.

The Demonstration Method

In demonstrations the instructor shows staff what to do and how to do it. Through explanations the instructor then brings out why, where, and when the demonstrated task is performed. Sometimes staff are expected to be able to repeat the job or operation after demonstration. Demonstrations are used to show how something is done and to:

(1) Teach problem-solving skills.
(2) Illustrate why something works.
(3) Teach the operation of equipment.
(4) Teach staff to work together.
(5) Teach safety procedures.

Advantages

Improves learning.
Minimizes damage and waste.
Saves time.
Can be presented to large groups.

Staff learn faster and more permanently with a demonstration because:

(a) Demonstrations give meaning to explanations.
(b) Demonstrations show relationships between steps of procedures.
(c) Demonstrations appeal to several senses.
(d) Demonstrations arouse interest and attention.

Equipment can be damaged and clients can be injured by improperly trained staff using unfamiliar equipment and procedures. Injuries can be prevented by the use of demonstrations during instruction. Planned demonstrations take much less staff time than other methods. They reduce lecture time and help prevent misunderstandings concerning how procedure is to be implemented or a piece of equipment used. Class size is limited only the ability of the group to see the demonstration. The use of models or role plays makes it possible to teach many operations to large groups of staff.

Disadvantages

Requires careful preparation.
Requires special classroom arrangement.
Requires equipment and aids.

Demonstrations should set performance standards for staff. The procedure shown must be technically correct and performed with competence. The instructor must insure that equipment is in working order for nothing fails as completely as a demonstration that doesn't work. The demonstration room must be set so that all staff can clearly see the demonstration. The purchase or construction of models represent a significant investment of time and money.

The Performance Method

Using the performance method staff are required to duplicate the procedure, skill, or movement being taught. Performance is learning by doing. The method has the same applications as the demonstration method and can be used as follow-on instruction to:

(1) Teach operations or procedures.
(2) Teach the use of equipment.
(3) Teach team skills.
(4) Teach safety procedures.

Advantages

Builds confidence.
Increases learning.
Enables learning evaluation.
Reduces damage and injury.
Promotes safety.

Given the opportunity to apply knowledge in a realistic situation, staff may develop confidence in their abilities and a positive attitude toward in-service training. Active staff participation increases interest and attention and thereby increases both the amount and the permanence of learning. Using the performance method, instructors can observe the learning attained by staff, locate staff having difficulty, and determine if there are weak areas in the presentation. Because performance is guided, staff

are less likely to make mistakes which damage equipment or injure clients. Guided performance allows emphasis to be given to the proper method of performance, thereby, preventing accidents.

Disadvantages

Requires aids and equipment.
Requires large blocks of time.
Requires more instructors.

Aids and equipment must be available in sufficient quantity for the size of the group. A well-run performance exercise can be time consuming in its requirements for setting up the room and equipment and for performance of the procedures presented. Unless the group is small, several instructors are required to check progress, give assistance when needed, and evaluate the quality of performance.

Programmed Instruction

Programmed instruction is self-instruction. Staff work through a sequenced series leading to the acquisition of knowledge or skills. Staff proceed through programs at their own rate, respond to each step in sequence, and receive feedback on the correctness of their response before proceeding to the next step. Programs are designed to permit the staff to master the desired knowledge or skills. Programmed instruction is used to:

(1) Provide remedial instruction.
(2) Provide instruction for late arrivals or absentees.
(3) Maintain skills which are not performed frequently enough to insure an acceptable level of proficiency.
(4) Provide training in revised procedures.
(5) Upgrade production, administrative, or other types of skills and knowledge.
(6) Accelerate capable staff.
(7) Provide a means of insuring common background data.
(8) Provide review and practice for previous learning.
(9) Provide training in a time limited situation.
(10) Give instructions in an individual self-paced way.
(11) Provide training for only one person at a time.

Advantages

Reduces failure rate.
Improves end-of-course proficiency.
Saves time.
Standardizes instruction.
Requires no special facilities.
Provides for self-instruction.
Provides adaptability.
Improves efficiency and economy for group or individual instruction.

Reduction in failure rate occurs because programs are self-pacing and staff are exposed to material at an individual rate. "Forced" response

and confirmation gains attention to the material, helps to immediately correct wrong responses, and prevents misinterpretation of the presentation. Thus, end-of-course proficiency is markedly increased by the use of programs. Developing programs that eliminate unnecessary content reduces the time required to learn critical material. Because the instructional content and sequence of a program are predetermined and are not subject to the whims, preferences, experiences, or biases of an instructor, the quality of the instruction does not vary from day to day nor from instructor to instructor. Complete control exists over the content, the sequence, and the form of staff response. Instruction can be standardized and repeated without change. Programmed materials can be used anywhere at any time. No specially equipped rooms or facilities are necessary. Programs can be used as substitutes for instructors. As the programs do the teaching, they are effective even if qualified instructors are not available.

Self-instruction programs can be designed for wide differences in aptitude, ability, speed of learning, prior training, and experience. The needs of individuals, whether for more or less exposure, detail, or practice, can be met. The size of a group is unimportant. Programs can be used to achieve group or individual progress. Self-pacing also allows great efficiency and economy. In addition, programs free instructors from routine, repetitive teaching tasks, and enable them to spend a larger part of their time on more difficult or more demanding aspects of instruction.

Disadvantages

Developers are difficult to find.
Increases expenses.
Requires considerable lead time.
Requires mature staff.
Poses administrative problems.

Although programs such as RATES exist, developed by the Ellsworth Community College, Ellsworth, Iowa and distributed by the Materials Development Center (see Chapter V), most commercial programs do not match the instructional needs of local facilities. Programs, therefore, must be developed locally. Very few trained developers are available and only a small percentage of trainers will become competent developers. Program development is, therefore, costly. Materials cannot be developed overnight. Even a considerable amount of lead time is required to screen and select appropriate programs from those that are available. If programs are developed by facility staff, the lead time for production is even greater.

Self-instructional programs require staff who are mature and motivated to work independently. They must also possess reading ability at the level required for full understanding of the program. Programmed materials create unique administrative scheduling and assignment problems. The self-pacing of the programs results in different program completion times resulting in scheduling difficulties.

Study Assignment

Assigned readings in books, periodicals, manuals, or handouts; the completion of a project or research paper; or the assignment of problems

and exercises for the practice of a skill is the study assignment method. This method poses difficulties in choosing worthwhile learning activities and anticipating staff problems. Study assignments are used to:

(1) Orient staff prior to lectures or demonstrations.
(2) Capitalize on individual strengths in ability, background, or experience.
(3) Provide for the review of material.
(4) Provide enrichment.

Advantages

Increases coverage of material.
Reduces classroom time.
Improves learning.
Permits individualized attention.
Reduces instructor interpretation.

Study assignments allow more material, in more detail to be covered in shorter periods of time than any other means. Assignments are substitutes for lectures and provide a common body of knowledge, making lectures, demonstrations, and conferences meaningful and productive. As practice is essential to the development of skills, assignments can allow practice leading to skill. Study assignments also are equalizers, making use of the experience, special skills, or interests of staff, to remedy individual deficiencies in knowledge or skill.

Disadvantages

Unmotivated staff are not likely to do assignments. Instructors must plan and assign work to make objectives clear and the instructions easy to follow. Instructors must later learn if the assignment was completed. Study assignments are difficult to evaluate for effectiveness. Variations in reading ability and differences in motivation produce varying results with the use of study assignments. Where standardization of learning is essential, study assignments may be inappropriate.

Coaching

In the coaching method, instructors work directly with individuals. Coaching is used to teach complex skills or procedures which involve danger to staff or clients.

Advantages

Permits adaptive instructions.
Stimulates active participation.
Promotes effectiveness.
Promotes safety.

Coaching is the optimum in individualized instruction. Instruction is tailor-made to meet unique individual needs. Coaching allows direct staff involvement in the learning process. The ability of the coach to adapt instruction to individual needs and the high degree of staff participation

makes this method an effective tool for reading instructional objectives. Close control over the performance of potentially dangerous procedures results in the prevention of injury to staff and clients.

Disadvantages

Requires highly competent instructors.
Demands time and money.

Coaching is a demanding type of instruction. Close student/instructor contact requires complete mastery of the skill being taught. Coaching is the most expensive method of teaching because instructor preparation and presentation time are essentially the same as they would be for a whole group though only one staff receives instruction.

Computer-Assisted Instruction

Computer-assisted instructional systems (CAI) regulate the difficulty of problems, rate of presentation, and type of material presented based on individual performance. As staff progress, the speed and difficulty of the program increases; if staff slow down or exceed a predetermined error rate, the computer adjusts the program accordingly. Computers allow a record of responses to be maintained. Computer-based systems engage staff in a responsive conversation through a keyboard.

Advantages

CAI systems facilitate instruction on complex analytical tasks. They also provide individualized drills for manipulative skills and teach advanced problem-solving techniques by interaction and/or simulation.

The CAI system has the same learning advantages as programmed instruction. Computers have additional advantages in speed of reaction and ability to adjust to the individual learning rates.

Disadvantages

CAI systems require a large investment for purchase of equipment and software development. Programs are difficult to design because of their complexity. Programmers are hard to find that can meet facility training needs. This is a blossoming field, however, and low cost hardware and software may soon be a reality.

Videotape Systems

Videotape systems consist of television cameras, lighting equipment, and videotape machines. Videotape recordings have several characteristics of great significance for training purposes:

(1) They can be used with many classes.
(2) They communicate sound, sight, and motion.
(3) They are ideally suited for showing processes and maneuvers.
(4) They heighten "real-world" presentations.
(5) They can transmit all other audiovisual materials.

Videotape systems can be used to:

(1) Teach the operation of equipment and sequence of procedures.
(2) Teach individual and group skills.
(3) Bring demonstrations into the classroom.
(4) Give close-up magnification of small parts.
(5) Allow staff to troubleshoot their own performances.
(6) Integrate films, graphics, or other training aids into an instructional sequence.
(7) Handle large groups.
(8) Repeat instruction.
(9) Provide a means of exchanging programs with other facilities.

Advantages

Personal contact.
Magnifies or reduces.
Provides selected attention.
Provides for identical instructions.

The ability of videotapes to provide immediate feedback for individual performance is of primary importance. With videotape everyone has a front-row seat to their own skills.

Lessons taped by the television camera force selective attention. Staff attention is directed to the screen and reduces the random attention. Videotape is selective, representing edited reality. Prepared lessons eliminate extraneous material and deal only with significant instructional points and examples which illustrate them. Once a lesson has been recorded on videotape it can be replayed as frequently as necessary. Every staff member is therefore exposed to the identical instruction.

Disadvantages

Restricts material.
One way communication.
Single paced.
Costly.

Videotape primarily uses medium range and close-up shots. Wide images are used rarely, and then only for viewer orientation. This limitation restricts the amount of written material presented and makes necessary the use of very simple charts, diagrams, and other visuals. The most commonly noted limitation of videotape is the fact that it is one-way communication. The instructor does not obtain immediate feedback from the staff and the clues it provides for pacing, for increasing or lessening the amount of detail, and for repetition of difficult concepts or ideas. Staff is cut off from personal communication with the instructor. A videotape lesson cannot be interrupted, slowed down, or speeded up. High purchase, production, and maintenance costs make it necessary to select carefully the instructional materials to be presented by videotape.

Combined Instruction

Using two or more basic instructional approaches is often desirable. For example, one program might include a study assignment on seizures, a lecture in which safety precautions in handling a client undergoing a seizure are emphasized, a demonstration of intervention procedures by the instructor, and, performance of the procedure by staff. Combination programs can be used to meet almost any type of instructional objective in any training situation. They are most appropriate where skill development is involved.

Advantages

Increases interest.
Promotes flexibility.
Improves learning.

A variety of approaches used in a combination provide an interesting instructional period. The use of several approaches frees the instructor from the restricting or limiting aspects of any single method. Approaches are adjusted to the needs of the class and the requirements of the situation. Combinations maximize the advantages of each method and allow the instructor to use approaches which complement each other. This results in improved learning.

Disadvantages

Requires highly skilled instructors.
Requires smaller groups.

Instructors must be able to use each method used with skill. A combination of methods requires closer control and supervision. To obtain control, groups must be kept small.

Team Teaching

Team teaching is a method of instruction using several instructors. One instructor is the team leader and the others represent differing subject-matter and method competencies. They jointly plan, conduct, and evaluate all learning activities for a relatively large group of staff. The total staff group may be taught simultaneously for some lessons and divided into smaller groups for other instruction. Team teaching is used to handle large and diverse staff groups, to maximize the use of instructor knowledge and skills, and to deal with individual differences in staff achievement, ability, aptitude, educational level, prior training, and experience.

Advantages

Team teaching increases effectiveness, promotes efficiency and promotes flexibility. Instructional effectiveness is gained by cooperative planning with a team of instructors. Instruction is provided using the most technically qualified instructor allowing the use of the best method and increased opportunity for staff participation.

Disadvantages

Team teaching requires quality planning. Each instructor must be able to work with the other members, know their assignments, know what other instructors are doing, and be able to interact with the team.

Selecting the Appropriate Method

Method selection is based on several analyses: instructional objectives, subject-matter, staff to be trained, available instructors, instructional facilities, equipment and materials, time, and costs (see Comparison Chart in Appendix C). The objective of instruction is the most important consideration in method selection. Objectives of a program that deals with job knowledge may require methods different from those chosen to develop job performance. Objectives must be examined to determine if the instruction job is to:

(1) Introduce a subject.
(2) Provide remedial assistance.
(3) Accelerate, enrich, or build skills.
(4) Teach manipulative skills.
(5) Build concepts.
(6) Teach operation and functioning of equipment.
(7) Develop teamwork.
(8) Stimulate interest.
(9) Improve reasoning and problem-solving ability.

The size of the staff group, the educational level, prior training, aptitudes, maturity, reading and speaking ability, and the teaching location are considered in selecting a method. The use of some methods need the establishment of maximum and minimum class sizes. Where class sizes exceed or fall short of the established figure, an alternative method is used.

The competencies of instructors is an important factor to consider in selecting a method. For example, if qualified instructors are not available to handle staff in-service training, programmed materials must be used.

Each instructional method requires specific facilities, equipment, and materials. When facilities are not available alternative methods are used. For example, videotape is the most effective media for the presentation of material, but the videotape machine is broken, an alternative approach is required.

The time available for instruction also influences the method selected. Conference and performance methods demand more time than lecture and demonstration methods. If time is extremely limited, an alternative to the most effective method is required.

Cost is also important in training programs. Time, facilities, and materials have price tags. The cost of the method used must be reasonable when measured against effectiveness. If the expected gains in learning effectiveness of a particular method do not offset the costs incurred by the use of that method, a less costly, even less effective method is used. Savings, however, must not jeopardize the instructional intent. Regardless

of its cost, the chosen method must provide adequate training with sufficient savings to the facility to justify its use.

Determine Instructor Requirements

Research ranking the importance of background elements in the success of instructors was conducted by Chappell (1980). Successful instructors were found to be those who had content competency and engaged in self-development activities, such as reading about staff in-service training. (See figure 4).

Self-development (reading, etc.)	4.149
Business experience	3.806
Seminars/workshops	3.522
Experience within organization	3.463
College undergraduate degree	3.433
In-house training	3.284
Technical experience	3.060
Continuing education	3.000
Experience in teaching	2.925
College graduate degree	2.642

Unimportant...1 Important...3 Essential...5

Figure 4: Chappell's Rank Ordered Indicators of Trainer Success

Instructor strengths relative to the instruction method to be used are primary to the choice of instructor. Technical knowledge, experience, instructional skills, and preferences for methods of instruction all vary. Administrators need to select the best instructors, possessing both technical competency and instructional skills. Instructional methods make different demands on the instructor. Whatever method used, the basic requirement is knowledge of the subject matter. An instructor cannot teach what is not known. The following information lists skills and abilities critical to the successful application of various methods:

Lecture

The instructor must be able to:
Organize for effective oral presentation.
Speak clearly, forcefully, and effectively.
Stimulate interest and enthusiasm.
Vary the presentation, in terms of vocabulary, sentence structure, and illustrations, to fit the staff audience.
Use skillfully a variety of training aids.
Check the adequacy of the presentation.

Conference

The instructor must be able to:
Speak clearly, effectively, and formally.
Stimulate interest and participation.

Maintain an informal atmosphere.
Convey teaching points and instructional objectives.
Keep the group aware of how well it is meeting its goals.
Summarize discussion points quickly and clearly.

Demonstration

The instructor must be able to:

Organize the demonstration to provide efficient learning.
Use tools, equipment, and aids skillfully.
Speak clearly, forcefully, and effectively.
Adjust commentary to the group.
Diagnose group difficulties.

Performance

In addition to the skills of demonstration, the instructor must be able to:

(1) Diagnose individual staff learning difficulties.
(2) Function effectively as a coach.

Programmed Instruction

The instructor must be able to:

Diagnose individual learning difficulties.
Conduct coaching instruction.
Motivate, counsel, and guide staff.
Determine the appropriate pace for instruction.

Instructor requirements must also be based on instructor work loads, staff-instructor ratios, and preparation times. A reasonable work load is essential to effective instruction. Instructors must be well prepared and rehearsed and time must be provided for these activities. Instructional methods require different amounts of preparation time. The complexity of content, the availability of reference materials, and the amount of research required are variables which must be considered. The number of staff that can be handled adequately by one instructor is a function of the method employed.

Select and Prepare Training Aids

Instruction is supplemented and reinforced by the use of a variety of training aids. Training aids are essential for increasing the efficiency and effectiveness of training by reducing the number of words required to communicate ideas. Aids help stimulate interest, increase attention, promote understanding, and provide experiences that cannot be obtained in other ways.

Training aids are anything that assists the instructor. When used for training purposes, the following are training aids:

Printed or Duplicated Aids. Books, manuals, pamphlets, guidelines, and handouts.

Graphic Aids. Pictures, drawings, illustrations, photographs, chalkboards, bulletin boards, easels, charts, and diagrams.

Three-Dimensional Aids. Models, synthetic trainers, and displays.

Projected Aids. Slides, transparencies, filmstrips, motion pictures, and videotape.

Auditory Aids. Tape recordings and records.

The instructor assumes the responsibility of selecting or developing training aids which complement the basic instructional method.

The following guidelines will aid in the selection of training aids:

(1) Select aids which fit the maturity, interest, and abilities of the staff group.

(2) Select aids which are most appropriate for the particular learning activity.

(3) Maintain a balance in the types of aids selected.

(4) Select aids which complement, rather than duplicate, other learning activity.

(5) Avoid the over-use of aids. Do not use an aid just because it is available.

(6) The major criterion of selection is: "Will it advance learning; is it needed?"

(7) Check copyright laws; can the materials be used?

Determine Equipment Requirements

Most training equipment is expensive and requires lead time for procurement or installation. Therefore, the equipment needed to support instruction must be determined in advance of use. Equipment used in training consists of standard classroom furniture and specialized training equipment associated with training for particular procedures, such as an "Annie" for CPR instruction.

Standards for determining training equipment requirements

Three factors determine the choice of training equipment: cost-per-staff, universal application, and projected utilization.

Because equipment may be expensive, costs must be budgeted and limits set. The cost-per-staff index is used because the procurement of expensive equipment may be justified by the number of staff to be trained annually. This index is computed by dividing the actual cost of the equipment by the annual number of staff that will use the training equipment.

Once the expense of the equipment is justified, the next consideration is to determine the amount of equipment required. The number of pieces of equipment required to conduct training efficiently is reduced by rotation of groups and careful scheduling. For lectures or demonstrations involving only equipment recognition, nomenclature, and technical characteristics, one item of equipment is sufficient. For the demonstration of equipment operation, one item of the equipment per group in concurrent sessions is sufficient. For the performance of individual skills, one item of equipment per staff receiving instruction is necessary.

EVALUATE THE IN-SERVICE TRAINING PROGRAM

In-service training can be visualized as a "tune-up" for facilities, just as auto owners regularly tune and lubricate their vehicles. The maintenance costs are justified by the future lack of problems. If, however, the auto owner performed the maintenance incorrectly or only maintained part of the automobile, the expense may be wasted. In-service training programs "tune and lubricate" staff members for job performance. Badly "tuned" and improperly "lubricated" by ineffective in-service training, staff members will fail to return the investment made in their maintenance.

Automobile owners rely on test equipment to assure that mechanics have maintained the vehicles properly. Facility administrators are also interested in designing tests to assure that in-service training programs provide cost effective results to the facility.

Use Test Results

Tests serve a variety of purposes. They may be broken into three categories: determine if training is effective in reaching objectives, improve the training system, and take administrative measures.

Determine effectiveness of training in reaching objectives

In-service planners need specific information regarding the quality of the instructional system and its effectiveness in attaining objectives. This is the requirement with the highest priority. The data derived from tests is primarily used to serve this purpose.

Improve the training system

Tests also provide in-service planners with the data needed to improve the program and its segments. Test results can be used to:

(1) Motivate staff to learn as much as they can in the shortest possible time.
(2) Identify staff that require extra instruction.
(3) Assure that minimum standards of performance are achieved.

Take administrative measures

Tests also provide a sound basis for taking administrative actions such as:

(1) The counseling of inadequately performing staff.
(2) The recycling of staff into training based on facility requirements and staff needs.
(3) The elimination of incompetent staff.
(4) The assignment of staff to positions based on competence.

The analysis of test results provides an important measure of the effectiveness of a program. Test statistics that include measures of central tendency, measures of tests variation, and measures of reliability should be used. Statistical analysis cannot be completed until becoming familiar with statistical techniques. Consult textbooks on statistics for this information.

Post Program Follow-up

In-service training programs are presented to increase staff qualifications for the performance of their jobs. Proof of in-service value is ultimately staff performance. To determine the effectiveness of the program and to provide information for revisions and improvements, on-the-job performance data of staff after in-service training must be collected.

Follow-up evaluators are selected to interview staff and their supervisors and to observe performance. Interview and observation are the primary means of collecting evaluation data. However, questionnaires may also be used to collect data. Questionnaires ask staff and supervisors to rate their performance before and after training.

Information about the in-service program gained through the data supported by tests and follow-up is then used to determine the effectiveness of the system and each of its components in operation. Training programs involve staff, instructors, content, sequence, time allocations, instructional methods, materials, equipment, and facilities. The end result of the training is affected by each element and effective evaluations must consider all elements.

Staff

Some program failures can be attributed to staff backgrounds. If staff do not possess the prerequisite aptitudes, skills, and knowledges needed for the in-service training as designed, they will not be able to acquire the job skills and knowledges the program aims to develop, at least not with the materials provided and within the time frame established. If the follow-up data indicates that staff did not possess the prerequisites for a program, changes must be made in the program or the prerequisites. Careful evaluation of the first program presented is vital to the continued usefulness of the program.

Instructors

The program instructor must be able to adequately convey the knowledge and skills offered by the program. By observing instructors as they present materials and by gathering information from staff participants, problems with instructors may surface.

Content

Duplication of content is avoided in the development of instructional materials. However, duplications and omissions may occur and these weaknesses must be identified. Classroom observation supplements obvious problems in the implementation of training.

Sequence and time allocations

The only way to determine if the sequence and time allotted to programs is correct is to try them out. Staff will report sequencing errors and improper time allocation when they attempt to learn the material presented. The comments of staff and instructor, as well as observation provides the data needed to improve sequencing and time allocations.

Instructional method

The best instructional method is deterred by experimental studies in which different methods are compared. Because these are expensive and time consuming, the adequacy of the instructional method selected is usually obtained by observation of the program. Observer judgment is relied upon to determine the method's effectiveness.

Materials, equipment, and facilities

The adequacy of materials, equipment, and instructional facilities is also evaluated by observation of the on-going program. Part of the job of an observer will be to note deficiencies in these areas and make recommendations for improvement.

Evaluations Can Fail

Program observation must not be the only method of evaluation. While this type of evaluation may be the best method in some situations, it cannot provide complete data on the effectiveness and efficiency of the program. The observations and evaluation of staff and instructors must also be included to get a rounded view of the program.

Failure to correctly evaluate a program and make useful changes can be attributed to planning, lack of objectivity, and improper interpretation of data. Some of the most common mistakes are:

Planning

(1) Failure to plan data collection instruments, specific procedures to be followed, and the timing of observations, surveys, and interviews.

(2) Failure to train evaluators in the principles and techniques of evaluation, including the use of data-gathering instruments.

(3) Failure to make clear to all concerned the purposes of evaluation and the uses to be made of evaluations and recommendations.

Lack of Objectivity

(1) Failure to select evaluators who are impartial and capable of making objective judgments.

(2) Failure to look at all of the components of the program.

(3) Focusing on unimportant details and "nitpicking" instructors.

Improper Interpretation

(1) Assuming that consensus in one group, such as instructors, provides a valid judgment.

(2) Concluding that an observation or judgment made by only one observer is inaccurate or invalid.

(3) Taking comments at face value, and not considering the nuances of language and the problem of semantics.

(4) Failing to take into consideration the perspective of the individual making the observation.

RESPONDING TO CHANGING IN-SERVICE NEEDS

Internal and External Changes Effect Training Programs

The effectiveness of in-service training programs is influenced by changes both within the facility and external to the facility. The program's effectiveness can be influenced even if no changes are made in the program itself. Potential environmental changes that could negatively influence the effectiveness of in-service training programs are:

Internal changes

1. Staff become fully trained in the areas covered by the in-service program.
2. Procedural techniques are altered after new training or behavior modification methods are learned.
3. New staff bring to the job an increased or decreased level of expertise.
4. The size and complexity of the facility changes.
5. The attitude and interest of administration or staff toward training alters over time.
6. Administration chooses to provide service in new markets.

External changes

1. Legislation passed at the local, state, or federal levels changes the required instruction in facilities (most likely in the medical or safety areas).
2. Accreditation agencies or funding bodies mandate changes in the types of training offered.
3. Changes in funding levels result in the decrease or increase of referrals, changing the relative need for training.
4. Changes in funding priorities alter the types of facility programs offered.
5. Contracted work opportunities are lost or added changing the skills needed within the workshop.
6. Technological changes in rehabilitation lead the facility to use different remediation methods.
7. Labor force demographics alter, changing the types of programs that facilities offer.

To react to these changes and keep the facility's in-service training program responsive to the needs of staff, program planners must provide for ongoing evaluation (see Chapter III) and must use the information gathered by the evaluations to quickly alter the training that is offered.

A Facility Example of Responding to Changing Needs

Area Residential Care, Inc., is a private, not-for-profit, Iowa based corporation located in Dubuque, Iowa. The facility founders charged the organizational leaders with the mission of providing services and programs for disabled persons. Clients are provided with a complete training program including developing independent living and vocational skills. Beginning operation in 1968, Area Residential Care has provided formal in-service training to staff since 1977.

Gary L. Gansemer, Director of Professional Services and Prevocational Training, at Area Residential Care, has provided the following description of the development of training programs at the facility, including start-up problems, the rationale behind management support of training, why major changes in approach occurred, and the identification of curriculum components.

The Development of an In-service Training Program

Why does Area Residential Care do staff training?

Area Residential Care began to train staff based on management conviction that:

1. Staff training is good for staff morale.
2. Staff training could help provide qualified personnel.
3. Staff training could help reduce personnel turnover.
4. Staff training was required by licensing bodies.
5. Staff training was required by accreditation bodies.

One basic reason for starting staff training was to improve staff morale. The need to raise morale was coupled with the need for highly qualified staff. With a high turnover rate at this facility serving mentally retarded persons, a solid program was needed to guarantee that staff were adequately trained at all times. By providing good staff training it was hoped that turnover could be reduced in some direct care positions, presuming that when staff are properly trained they gather more satisfaction from their job and stay in their positions longer.

Some facilities look at licensure and accreditation standards and develop the minimally required in-service program. However, such a procedure will require continuous "fire fighting" and may not meet facility needs. The training developed at Area Residential Care exceeded the standards obligated and was more comprehensive than required.

The Iowa Department of Health requires in-service training. Their standards imposed on facilities serving mentally retarded persons are vague. Standards require a monthly in-service program for staff and completion of ten approved training hours each year for activity coordinators and administrators.

The Iowa Department of Social Services also requires an in-service program. These requirements include only four items: coverage of facility philosophy, an introduction to the organizational structure, a presentation

of previous program practices (undefined), and discussion about the goals of the facility.

Area Residential Care is accredited by the Accreditation Council on Mental Retardation and Developmental Disabilities (AC/MRDD). AC/MRDD standards have a complete section pertaining to staff training. The standards require coverage of the following items: facility orientation; supervisory and management training; the individual program plan process; the principle of normalization; first aid training including the Heimlich maneuver; CPR for appropriate staff; seizures for those working with epileptics; documentation of training in the personnel files; and professional contact training for nurses, occupational therapists, speech therapists, etc. approved by respective state governing boards.

The Development of a Formal Program

Prior to 1977, Area Residential Care did not have a formal staff training program. In-service training evolved as training needs changed:

The informal days

Each department explained facility procedures when new staff members were hired. There was no common requirement within the facility. Specialists, such as behavior modifiers, speech and music therapists, and nurses provided training to staff on a consulting basis but not as part of regular training for new employees.

First training program instituted

The first formal attempt to provide a staff training program which combined goals of orientation and skill building was instituted in 1977. An overview of the services available from the support services department was offered. The training aimed at the preparation of staff to use the various techniques and procedures available. Three different methods were used to provide the training: videotape, workshops, and self-instruction. The objective was to provide staff with an opportunity to obtain training within their first few months of employment.

The first method developed was a black and white videotape presentation. A series of tapes covering several subjects was produced. The first tape was half-an-hour overview of support services specialties, describing what each support area did and how their services could be used by staff. Second, came an overview of the human rights committee, presenting the steps staff could take when concerns regarding the rights of clients arose. An overview of sex education was developed third. This tape presented mentally handicapped persons as sexual beings with the right to sexual feelings and a need to express themselves sexually. The fourth tape was an overview of hand signs in current use by facility clients.

The second in-service method was a series of four workshops, each workshop about four hours long. One workshop presented behavior modification, a second presented first aid treatment and nursing policies, a third discussed sex education, and a fourth trained staff in crisis intervention. Each workshop was offered once every four months.

The third and final method used provided individual program planning in a self-taught manner. It was a twelve hour training program using the Individual Program Planning (IPP) training package developed at the Texas Tech University Research and Training Center in Mental Retardation. Groups of 8 to 12 staff met for six, two hour sessions, read through the materials, and did exercises as indicated.

Tours of the facility for new staff members were also scheduled whenever there were three to five people who needed orientation. This was provided at staff convenience.

The three methods of training were used for approximately two years, but flaws in the program design were discovered. The program failed to provide information on needed topics and not all staff received timely training.

Evaluations left administrators feeling that the program did not cover enough areas and give enough attention to some topics. The evaluations also showed that staff were not completing their training program within a six month period. Some staff members had been employed an entire year and had not attended the required in-service training sessions. Finally, it was discovered that the videotape format was subject to frequent equipment malfunctions and was not very motivating or interesting for staff.

The use of need assessment marked our next program

Facility administrators decided in 1979 that the facility needed to change training directions. Area Residential Care departmental directors did not feel that the training was broad enough and saw that training policies did not compel staff to attend in-service sessions. A survey of staff was conducted to elicit information about previous in-service sessions and to allow them to state priority areas for future training. Staff members were asked to evaluate a list of possible topics and rate (on a scale of 1 to 5) the topic's importance to the completion of their jobs. From this survey, top priorities for further training was developed and a three day, 24 hour in-service for staff was proposed.

This new in-service package was offered for three consecutive days in a location away from the facility in order to minimize interruption. New staff members would only be excused from scheduled training sessions through written permission from a department director (see Appendix E for sample forms). The three day in-service added the perspective of a client's parent, a presentation by occupational therapists defining their role in the facility, and a presentation by the executive director on the history, philosophy, and goals of the facility to training areas expanded from the initial training program. The 12 hour IPP training program was trimmed to give the meat of the program planning in a shorter period of time. In addition, an introduction to developmental disabilities was provided.

This three day in-service program was offered once every three months allowing all new staff members to complete in-service training requirements in half the time needed for earlier programs. Evaluations of each in-service session were carefully obtained to allow assessment of the quality of training and the importance of the training to position tasks. From the evaluations,

alterations in the in-service program were routinely made. This allowed the program to be responsive to staff needs.

This program met the facility in-service training needs for three years, but concerns surfaced in 1982. Problems with staff not receiving training necessary for the completion of their jobs was continuing. When staff were ill during their scheduled three day period or scheduling conflicts arose, the staff would need to wait three months until the next scheduled program. Some staff therefore waited six or nine months before they completed formal training. The three day sessions also required too much consecutive time away from the job.

Scheduling problems motivated more revisions

Assessment of the problems indicated that the program needed to be changed to a monthly basis, but that the system must allow all component sessions to be completed within three months. Program expansion was also necessary as staff needed to receive training in areas that were not being provided within the facility (the Department of Health had moved to require a 60 hour resident attendant course for all staff passing medications).

Incorporating the requirements for resident attendants with many of the training presentations of previous programs, a 66 hour training program was developed. Approximately 36 hours of the program formed a core course for all staff with the remaining hours required only of those staff with resident attendant responsibilities. This program was instituted in January of 1983.

Two or three in-service sessions were scheduled for each month throughout the year and the dates of all 1983 in-services were posted. When a staff member was hired, their department director scheduled them for in-service training by referencing the master list. The director would list those sessions they wanted each staff member to attend. This would be submitted to the Professional Services Director for scheduling. Copies of the formal schedule were then forwarded to individual department directors for their records and to the staff member scheduled for training. This system allowed training to ensue as soon as possible after an employee was hired (see forms in Appendix E). Each staff person would begin training at different points in the system, but over a three month period they would receive training identical to their peers.

One week prior to each training session a reminder note would be sent to the staff member scheduled and department directors. The reminder gave the in-service date and location. This prompted regular attendance (see form in Appendix E). Most courses were offered in the afternoon hours with exception of two full-day sessions. Training was given priority status and attendance was required. Compensation was given if the training sessions were offered outside of regular work hours.

Self-taught methods were also offered in the areas of seizure disorders, introduction to mental retardation, and introduction to behavioral techniques. Each had a pretest and a posttest. Pass criteria on the pretest was established and if a staff member met or exceeded that criteria, they did not need to complete the training materials. If they did not meet passing criteria

in the pretest, their supervisor was responsible for providing training materials and administering the posttests. Pretest and posttest scores were turned in to the training staff for documentation.

Program Evaluation is a Key to Success

Evaluation continued for all in-service programs. The evaluations were a very useful way to discover needs applicable to staff positions. Evaluation allows the improvement of training techniques. After each program, evaluations are tabulated and shared with instructors.

Evaluations provided information that led to changes in 1984. Using a format similar to 1983, scheduling was changed to a different frequency. Sessions that are required of all staff members are scheduled on a three month rotating basis and sessions required only for resident attendant staff are scheduled once every four months.

Frequent assessment of facility training needs allows quick changes to be made. Assessments led to changes that now reflect heavier emphasis on first aid, training in medications, and training in seizure disorders. Evaluation data that indicated that self-taught programs on behavior techniques are not as effective as lectures led to method changes in that area. These self-taught programs may have greater value as screening devices (see Appendix F for current curriculum).

Changes in training must be accommodated to keep programs vital

The facility's philosophy has changed regarding staff training since the first programs were offered. Initially it was difficult to get staff to attend training programs and to have supervisors and directors appreciate the importance of in-service training. Now staff are open to attending the sessions. Other employees tell new staff that training is worthwhile and helps them carry out their jobs. Also, department directors are now very supportive of the programs and encourage their staff to attend the in-services. They also rearrange staff schedules to make attendance possible.

In order to avoid scheduling conflicts with trainers coming into the facility from other training resources in the community, all instructors are full-time facility staff. The instructors know what staff members experience each day and understand their needs. As all areas of training cannot be covered by these regular programs, special training sessions are offered throughout the year. These sessions are sometimes presented by community specialists. For instance, local dentists talk about dental care, a podiatrist talks about foot and nail care, and other specialists provide management training.

Management training is an expanding area. A program that continually provides new options for present management staff and also orientation for staff initially entering management positions would be very desirable. It is very common in this facility as in other human service organizations to promote managers without formal management training. Cooperative training with other area organizations is another big interest area. This can have the effect of lowering training costs for many facilities.

Throughout the six and a half years that Area Residential Care has provided formal staff training, the philosophy of providing training that meets staff needs has been followed. Therefore, revisions of content and method are made to keep the program current. This is a continuous process.

MODELS OF TRAINING PROGRAM ELEMENTS

The following models of training program segments are presented to show examples of materials that can be used for group training sessions, individual orientations, or combined group and individual learning. The Stanton format provides a learning exercise for use in training a group of staff members. Rottier's training package is designed to be used as an orientation for new staff members and is read by the individual as time permits. Finally, the RATES module and training exercises can be used either as individual training guides or as a reference module for group training sessions. The choice of format to use in your facility depends largely upon the training tasks you wish to present. (See Chapter II in the section titled "Select instructional strategies" for more information).

The Stanton conferencing instructional package for group instruction

Training packages, often called modules, can be used within the rehabilitation facility to provide training staff with lesson plans. These packages are to be built around specific facility needs. Such a training module follows. Developed by Allan R. Stanton, the training package presents materials for providing staff with information on staff conferences in work adjustment programs. The format that is followed could be utilized by facilities for many staff in-service training needs. Stanton developed the training material as a project conducted for completion of his master's degree in vocational rehabilitation at the University of Wisconsin-Stout in 1978. The training package is not available commercially.

INTRODUCTION

TITLE - Staff Conference in a Vocational Rehabilitation Facility Adjustment Program

PROGRAM DESCRIPTION

This training package on holding staff conferences in a vocational rehabilitation facility focuses on the progress staff conference within a work adjustment program. The package is meant to provide an introduction to the relationship of the progress conference to other conferences which may be held in a rehabilitation facility and the position it occupies within a program of adjustment services provided to facility clients. Some of the techniques considered effective and some essential considerations for the conference are presented for discussion.

The format given for structuring the sequence of the conference process is based on a working model in an actual facility. The structure is not proposed as a rigid model to be followed without deviation; on the other hand, adaptation should not substitute looseness for structure.

Following an initial presentation on the classification of conferences, participants in the training session will be given a case history including client background information, work evaluation results, and an adjustment plan with progress data. The case history material will be used in two role played conference exercises following the initial presentation. In

addition, a third role play exercise is suggested, in which the training participants themselves act out conference member roles. Given the participant evaluation form, each participant will answer the questions to 80% accuracy.

Based on the actual presentation of a preceding version of this package, the proposed time for completion of this package is one hour and 45 minutes, including a break and the third role play exercise.

INTENDED TARGET POPULATION

The package is designed as an introductory in-service training program for staff in a vocational rehabilitation facility adjustment program. Other personnel within the facility or from outside agencies who participate in an adjustment (progress) staff conference should also find the training program useful.

RATIONALE

The staff conference procedure can serve several functions in a program of services, including:

1. program accountability and evaluation requirements.
2. standards set by C.A.R.F. (Commission on Accreditation of Rehabilitation Facilities); and,
3. a vehicle for information-sharing, problem-solving, decision-making, program-planning, and client involvement in his/her program.

Used within many rehabilitation facilities, the conference is considered an important tool. As a tool, it has a purpose and appropriate ways of handling it to perform the required task. Like a knife, it has a keen edge which can be dulled or broken by misuse.

PREREQUISITES

Since the target population consists primarily of facility staff and outside agency professional personnel, the qualifications required for these positions are considered to be sufficient evidence that participants possess the level of academic skills needed to successfully complete the program.

Possession of skills in the following work-related areas is suggested:

1. making and recording behavioral observations.
2. writing behavioral objectives.
3. developing individualized work adjustment plans.

INSTRUCTIONS TO TRAINER

TRAINING AREA CONDITIONS

Make sure the arrangement of the area where this training session is held is such that all participants will have a clear view of the actors in the first two role play exercises; make sure also that the participants

will be able to hear what is going on. A relatively quiet, distraction-free setting (such as a conference room if available) is suggested.

PRESENTATION AND TRAINING EQUIPMENT

The following equipment and materials are required prior to the presentation:

For the training leader - this training package (one copy), and Case History (one copy).

For each participant (including training leader) -

1. Chair
2. Staff Conference Report Form (one copy)
3. Staff Conference Observation and Evaluation Form (three copies)
4. Participant Evaluation Form (one copy)
5. Pencil

For each (group of) four participants -

1. Staff Conference Report Form (one copy)
2. Staff Conference Observation and Evaluation Form (one copy)
3. Case History (four copies)
4. Refreshments are suggested.

SETUP

The session is divided into the following activities with proposed time frames:

1. Introductory presentation by training leader. (5-15 minutes)
2. Role play of a "bad" staff conference, with the following parts: facility adjustment specialist; referral counselor; and, client. (15 minutes including orientation)
3. Critique of role play by audience and discussion with training leader; training leader presents additional material if appropriate (points not covered during critique). (10 minutes)
4. Second role play, with same roles and actors as before; this time the role play incorporates feedback from the critique and discussion period to portray a "good" staff conference. (10 minutes)
5. Critique of second role play by audience. (5 minutes)
6. Presentation by training leader or additional considerations involved in holding a staff conference; summary. (5 minutes)
7. Break. (10 minutes)
8. Suggested third role play exercise for participants:

    a. Orientation and formation of groups (5 minutes)
    b. Review of case history by participant actors (5 minutes)
    c. Role play (10 minutes)
    d. Observer feedback within groups (5 minutes)
    e. Debriefing (final summary by training leader) (5 minutes)

9. Completion of Participant Evaluation Form by each participant. (5 minutes)

In preparation for the training session, the following tasks should be completed:

1. Make up the required number of forms as listed in PRESENTATION AND TRAINING EQUIPMENT. Note that each participant in the session to receive at least one copy of each form; additional copies of two of the forms are also prepared for use in the group role play (third) exercise. These forms may be saved by participants for future reference as guides for preparation of presentations in actual staff conferences. Note: The Staff Conference Report Form is the guide for sequencing the presentation of material in a staff conference. This format is suggested as a model for structuring the conference process. The Staff Conference Observation and Evaluation Form is used to record behavioral observations on group performance in general and the work adjustment specialist in particular (since this person generally functions as the leader in a progress staff conference). The Participant Evaluation Forms are handed out to each participant at the end of the training session, to be collected and graded by the training leader upon completion.

2. Prepare the required number of copies (refer to PRESENTATION AND TRAINING EQUIPMENT) of the Case History. Two ways of approaching this are possible, depending upon the preference of the training leader. A fictitious Case History (Siettman-Parlin and Stori, 1977) has been provided with this package which may be used. Or, the leader may wish to prepare case file information on an actual client with whom the training participants are familiar. Of course, if this option is chosen, legal and professional ethic requirements pertaining to confidentiality must be met. In general, a fictitious name (care must be exercised to prevent the real name from "slipping out"), and deletion or change of other positive identifying information (such as address and social security number) taken from the case file, should be sufficient. To be complete, case file information should include:

   a. Background (general description) statement;
   b. Evaluation results: educational, medical, psychological, social (living situation, for example), and vocational (if available); and,
   c. Adjustment plan.

The case file exclusive of the adjustment plan need only be 1-2 pages (single-spaced). A useful adjustment plan format is the Esser model (Esser; 1975). However, standard formats used by your facility may be used as long as they provide useful reference data.

3. Select staff members or others who will play parts in the first two role plays. Through experience, the functioning

of the training leader in the dual capacity of leader/actor has been found difficult to manage, since it requires switching back and forth. For this reason, a person, other than the leader, with experience in staff conferences is suggested. A practicing referral counselor is suggested, although not considered essential, for that role; the counselor (or other person) selected should be one who, in the experience of the training leader, takes a very professional "business is business" stance in actual conferences. This type of professional will most likely be able to work cooperatively with the training leader in drawing out inappropriate and appropriate conference participant behaviors. There is a possibility that getting a counselor to spare some time to participate may be difficult; however, a bit of fancy public relations footwork can be used as bait in convincing the person of the potential benefits to be reaped from cooperation. Since time is valuable, an increase in effectiveness of the conference process will result in less "wasted" time during the conference and subsequent follow-up actions. The client role can be relatively undemanding; the role may be played passively or actively at the whim and discretion of the training leader and/or actor (another staff member).

4. A final key point in preparation is familiarization with the material in this package. As in the conference itself, being prepared helps maintain a smooth, structured flow of events.

Rehearsal for the role play is not essential if the role play actors feel pretty secure about the material; however, the training leader and actors should discuss possible ways of handling the role play. The key to a good role play, whether of a well or badly run conference, is that each actor attempt to be sufficiently attuned to what another actor is attempting to accomplish while the role play is in progress. In other words, play it by ear; be imaginative. And, remember that mistakes (which are unavoidable in any situation) offer perhaps the best opportunities for learning. Suggested behaviors for handling conferences inappropriately or appropriately are listed in PRESENTATION in the instructions to trainer paragraphs preceding the role play sections.

The content of the training session is given in PRESENTATION. The material may be covered in as much depth as time permits. The overall length of 55 minutes (up to the third role play) has been suggested but is not mandatory. If you get some good discussion going, don't cut everyone off. On the other hand, keep in mind that time is a precious commodity and should be used to provide structure to any meeting. If going beyond an hour is required by the amount of discussion generation, make sure a break is provided at the one-hour point to help avoid fatigue.

For the same reason, the Staff Conference Report Form passed out for the third role play is filled out prior to the training presentation. The training leader may take the option of having the actor playing the part of the work adjustment specialist (or the subgroup as a whole) fill out the form prior to the actual role play; in the interest of reducing the

length of the overall session the suggested method is to have the Report Forms filled out beforehand by the training leader, using the Case History information.

PRESENTATION

PART ONE - INTRODUCTORY PRESENTATION (5-15 minutes)

Notice to leader: the narrative to be delivered to the participants in PART ONE is arranged in sentence/paragraph format.

In the General Introduction section, headings are given to indicate only the purpose of the narrative given. In the Specific Introduction, headings (A., B., C., D.) are intended for inclusion in the narrative.

I. General Introduction (material given in parentheses in this section may be selected or deleted at the leader's discretion.)

A. Ice-breaker

1. Thank you for all for attending this session today (even it if was required).

2. I did a dry-run of this material last night at home. I just talked to the walls, who were pretty (damned) unresponsive, but they were there, and a captive audience. I discovered my planned five-minute introduction was going to take at least 15 minutes, but I have a lot of material to present that I think will provide a useful background for our activities today.

B. Importance of material to be covered

1. Each of us has something to learn about participation in a staff conference.

2. The enormous amount of literature on the following topic indicates we all have a great deal to learn, since all these areas have a bearing on how conferences may be run:

a. groups (and the staff conference is a group; a group of people with a common purpose, to reach a certain objective);

b. group dynamics, leadership techniques, and responsibilities of group members;

c. decision-making theory;

d. program planning;

e. communication theory;

f. organization theory and business management;

g. multidisciplinary teams; and

h. report-writing (to name just a few).

3. Feedback from professionals in the field who have been to poorly run conferences (and personal experience - I have been to and led bad staff conferences myself) point(s) to the need for training in this subject.

II. Specific Introduction

A. There are two general forms of staff conferences.

1. The formal staff conference is scheduled and structured. It is scheduled to meet at a certain time and place, and various people are invited to attend. It is structured in the what and how of the presentation.

2. The informal staffing is unscheduled and unstructured. Two or more staff members meet by accident or by design, and discuss clients and/or program concerns. The key differences here are that the meeting is spontaneous, impromptu (or if held by design, not much preparation or advance timing is usually involved); and that an adherence to a process-structure is involved.

B. There are two general categories of forms.

1. The client-centered conference involves discussion of clients at the facility, their programs, objectives, progress, results, recommendations, and other aspects of programming and services.

2. The administrative conference generally takes one of three forms:

a. program development (expansion of existing programs, addition of new ones);

b. task-force problem-solving (the staff identify a problem area, such as too much time spent to write reports, and come up with alternatives in the search for a solution); and,

c. supervisory/administrative staff regularly scheduled meetings of departmental supervisors and executive staff to discuss department performance, throw problems out to the group for input, discuss department performance, discuss overall facility programs, activities, events, and other common concerns).

C. Types of formal, client-centered staff conferences (classification scheme proposed by the developer of this training program); a process-descriptive nomenclature.

1. Selection (eligibility, initial-planning, intake are other terms which may be used): occurs in either evaluation or adjustment. The referral counselor and agency staff (and possibly other

involved persons) discuss client background, referral reasons and questions, and begin program planning. The client may also attend (perhaps I should say, "should attend!").

2. Program: usually confined to adjustment programs (and is the type to be discussed in more detail here today). Involved personnel meet to discuss a client's program plan, objectives, progress to date, and propose recommendations for continuation or alteration of the plan and/or additional services.

3. Evaluation: occurs in both evaluation and adjustment programs. Involved personnel meet to discuss the client's program, results, and recommendations for future services to be planned by referral counselor.

4. Consultation: an outside uninvolved (impartial) group of representatives of community social service agencies (school system, family planning, mental health, welfare, state employment service, and others). This group may already exist or be called together especially for the purpose. In either case, the facility staff ask to present a problem case before the group; the staff have encountered a roadblock in the program for a client, such as lack of success in finding effective adjustment methods. Background information is presented (with concern for confidentiality), program objectives outlined, treatments explained, and results discussed. Input from the group on alternative approaches is requested.

5. Interdepartmental coordination: a meeting of department supervisors, of areas in which clients are working, and rehabilitation staff. The staff present information on program set-up for the clients. There are two purposes for this. First, the aid of the supervisors can be enlisted in assisting the client to meet his objectives; they can take an active role in the client's programs. Second, with knowledge of client objectives and the techniques being employed, the supervisors are less likely to unwittingly interfere with client progress (for example, if the staff and client are working to reduce the client's handshaking behavior towards all persons who enter the area, the supervisor will know to keep his hands at his sides).

III. Summary of Introduction

A. We have explored the different forms and types of staff conferences; an attempt was made to give an introduction to the relationship of the adjustment process conference to other conferences which may be held in a rehabilitation facility and the position it occupies within a program of adjustment services provided to facility clients. A classification scheme was introduced and a brief description given of types of formal client-centered staff conferences.

B. Since we have a limited amount of time available here, we will now move on to the "hands-on" portion of this program.

PART TWO - FIRST ROLE PLAY (5 min. orientation, 10 min. role play)

Notice to training leader: The leader's narrative for the remainder of this package is given in a boxed-in format; since instructions to guide the trainer are interspersed with the presentation narrative, this format was chosen to assist in distinguishing the two types of material.

> The schedule for the rest of this program begins with a role-play of a "bad" staff conference - a lesson on what not to do.

Name and identify the role of each of the role play participants.

> You (the audience) will observe what goes on during the conference programs with the purpose of identifying problem areas in the presentation of material and participant behavior. Your observations can identify problems on the part of any of the roles, but since the adjustment specialist is the chairman of the conference, focus on him/her.

Discuss the purpose of the forms provided (refer to SETUP). Ratings need not be assigned; the important feedback is observations, behaviorally stated as much as possible. The report form may be used by the audience as a guide to the sequence of presentation in the role play, if desired.

> After the role play, we will have an opportunity to share observations and feedback, and discuss methods of improving the conference. Then we (the actors up here) will hold a "good" conference: at least we are going to do our best to <u>try</u> to hold a "good" conference, so bear with us. Hopefully we will use what you have given us, and demonstrate our learning ability.
>
> After the second role play, we will take a few moments to critique the "good" conference: as far as negative points are concerned, we hope this critique won't take very much time. Then a few more considerations pertaining to staff conferences will be thrown in, followed by a general wrap-up. And then, a much deserved break!

Since the role play is a dynamic process, the course of events can and will vary; the role play may never be duplicated exactly. The following questions are intended to serve as a guide for ways of handling a conference inappropriately.

1. Hesitate and/or bluff through questions.

2. Be funny (not precise) with details.

3. Talk all around the point at hand - don't be concise.

4. Be subjective; use labels in discussing the client (lazy, hostile, nice guy, etc.).

5. Don't establish eye contact and/or maintain it through sweeping; instead, count the tiles in the ceiling, or the tiles on the wall.

6. Make it seem like you haven't done your homework; this is related to hesitation and fussiness, but also includes over-use of (dependence on) reference material also. For example, read case file information right off the files instead of just glancing at it occasionally.

7. Don't give information freely which you know the counselor will want; make him ask you for it.

8. When giving recommendations, be "off the wall": recommend only one job, and/or the same job at which the client is working at the facility. Recommend a job such as shopkeeper for a person who is habitually absent, or a job in drafting for a person who exhibits "frustration" behavior on precision work.

9. Be non-specific in recognizing or accepting follow-up obligations in response to counselor requests for more information or programming; if you've handled well this role playing of a "bad" conference, you should end up with a whole bunch of things the counselor will want you to do since you don't appear to have done them already!

10. Be lavish with extraneous material: weather, personal activities planned for the weekend, transcendental meditation, politics, the state of the economy - the works. Other topics are more subtly extraneous, such as the current condition of the local labor market and anything else that may seem important and/or relevant at the time but isn't since you can't do a thing about it anyway.

The actor playing the role of adjustment specialist should plan for wrapping up the "conference" about two minutes before the end of the role-play. The "specialist" should ask the "counselor" if he/she would like to have the client come in. The specialist then should get up (assuming the "counselor" said "yes"), go over to the training session audience and ask the actor, selected for the role of client, to come in. (Note: allowing each role-play actor to observe as much as possible of the entire training session as part of the audience is recommended).

In a real-life situation, the involvement of the client at this point of the conference can take many forms; restricting the part to the barest minimum appropriate is suggested for the role play in the interest of saving time. The specialist should review what was discussed (briefly) and highlight

results and recommendations. With the client in attendance, this is also an opportunity for staff to "stroke" the client (praise him/her for progress). The client's presence can provide opportunities for the staff conference to go badly, so play it by ear; the actors should remember however, that they have two minutes.

When the role play is finished, the leader should orally thank the actors (at least, smile or nod) for their participation; you want them to come back for the next role play.

PART THREE - CRITIQUE AND DISCUSSION (10 minutes)

What happens here depends on the amount and type of feedback you get. All participants including the actors may provide input.

As a guide for appropriate discussion, the ineffective behaviors attempted in the portrayal can be used as starting points. Any inappropriate behaviors portrayed but not noted by the audience should be pointed out. Also, any behavior listed previously as suggestions which were not demonstrated may be included in the discussion.

PART FOUR - SECOND ROLE PLAY (10 minutes)

> Now we will attempt to use all the information you have provided to hold a "good" conference. Again, record your observations on the staff Conference Observation and Evaluation Form; mark the sheet "good" (mark the one you just used, "bad"). You may record weaknesses as well as strengths.

Now the actors, drawing from their experience, including all the information provided through the critique and this training package, portray the way a "good" conference should go. Thorough preparation in reviewing case file data, and a disciplined adherence to a logical and efficient structure will be the keys to a role play of a "good" conference, as well as to a "good" staff conference itself!

Turn all those inappropriate behaviors (suggested in the section on the first play) into positive ones. For example:

1. Answer questions with minimal hesitation, even when you don't know the answer. If you don't know, admit it.

2. Be specific.

3. Be concise, to the point.

4. Be objective; leave out the labels.

5. Maintain eye contact through sweeping (keep eyes moving from person to person, focusing on each person for a few moments).

6. Be prepared.

7. Volunteer information you know the counselor will want to have.

8. Be imaginative and reasonable in recommendations.

9. Accept follow-up obligations; specifically state what you will do and that you will get back to the person with the question.

10. Use extraneous chit-chat only as a beginning ice-breaker to session.

Again, as before, the actors should call in the "client" when about two minutes of the role-play remain.

PART FIVE - CRITIQUE (5 minutes)

You guessed it: what happens here depends on what went on in the role play. Again, behaviors you attempted to portray (or did so inadvertently if inappropriate ones) would be identified by you as training leader if not by the participants.

PART SIX - ADDITIONAL CONSIDERATIONS AND SUMMARY (5 minutes)

Some additional considerations pertaining to the staff conference are:

1. As part of preparing for the conference, know your counselor (his/her hang ups, or idiosyncrasies). Build on his/her observed strengths, and play to his/her weaknesses with the objective of providing that logical efficient structure. Play to, don't surrender to; the conference chairman (the presenter often takes on this role) has primary responsibility for the structure.

2. Notes should be taken during the conference, especially of what will later be important when attempting to remember what was said and what was not said. Note-taking should be kept to a minimum; however, to minimize distraction and increase active listening. There is no definition of minimum; however, all information presented which is prepared prior to the conference should be duplicated for distribution to conference participants.

3. The staff conference serves an important function as a vehicle to satisfy several C.A.R.F. (Commission on Accreditation of Rehabilitation Facilities) standards, in addition to the CARF requirement for staff conferences themselves. Those standards include:

a. evidence that persons involved in a client's program are aware of their role in carrying out the plan (section 3.4.3.1.2.2); and

b. evidence of client participation in decision-making (section 5.1.2.14).

4. I just mentioned client participation. What about this issue? Should the client be present throughout the conference session, during part of it, or not at all? The answer to this involves:

   a. client rights for participation in decision-making,

   b. the extent to which a given facility encourages a client to make decisions (at least one facility in the States train clients to act as chairman in their own staff conferences); and,

   c. how presentation of information will differ when the client is present as opposed to when not there; for example, certain information such as medical or psychological evaluation data and diagnosing labels may be deleted in the client's presence.

5. Confidentiality of client information shared in the conference must be protected.

In summary:

1. We have gotten some ideas of how the progress staff conference fits in with other conferences held in a facility;

2. We have seen examples of "bad" and "good" staff conferences and have gotten an idea of what <u>makes</u> a conference "bad" or "good."

3. Some of the key points made are:

   a. The staff conference is a group of people meeting with a common purpose, to reach a certain objective;

   b. The basic foundation of the conference is <u>information-sharing</u>; this foundation requires ingredients of thorough and adequate preparation of material and an orderly structure for presenting this material.

   c. The foundation of information-sharing (giving and receiving by all participants) supports all other goals of the conference, such as decision-making.

   d. Reaching the goals of the conference can be thwarted by off-tracking; extraneous material must be limited in extent, and to use as an ice-breaker to begin the process.

PART SEVEN - BREAK (10 minutes)

If the third role play exercise is schedule to take place at this time, invite the participants to take a 10-minute break for refreshment. If the training session is to conclude at this point, pass out the Participant Evaluation Form and allow 5 minutes for completion. Collect the forms and thank the participants for their time, attention, and input.

PART EIGHT - THIRD ROLE PLAY

Instruct the audience to split up into groups of four; if there are any participants left over, they may join any of the groups formed, but there should be no more than one extra participant in any group. If necessary, the training leader may join a group to bring up the number of group members to four. Allow 5 minutes for the forming of groups and the following orientation.

> Now you will have a chance to practice what you have heard today on effective conference participation. Each group will be given a case study, a Report Form already prepared with client program data, and observation forms. The roles to be played are as follows:
>
> 1. work adjustment specialist;
> 2. referral counselor;
> 3. client; and
> 4. observer.
>
> Each group will decide among themselves who will play what roles; if there are more than four members in a group, the extra members may act as observers also. You will be given 5 minutes to review the case history, and will then hold a 10-minute role play in each group. Following the role-play the observers will provide feedback within the group on participant performance. We will then get back together for a debriefing and a brief quiz.
>
> You will be attempting to portray a good conference; however, don't worry too much about making mistakes, you will anyway, and this is often the best way to learn if you are aware of what you did and how it could have been done better. Good luck!

The training leader should now pass out the required forms (Staff Conference Observation and Evaluation Forms to the observers; Staff Conference Report Form to the adjustment specialist; and, Case History to each member). Allow 5 minutes for review of the case file information, then instruct the groups to begin the role play.

When the allotted time is up, ask the observers in each group to provide feedback to the group members on their performance. Allow 5 minutes for this.

We have explored the topic of staff conferences here today and have gained some "hands-on" experience in holding a conference. May the next conference you lead or participate in be a "good" one. The last thing on the agenda today is a quiz on the material presented; please take a few minutes to answer the questions.

The leader should now pass out a Participant Evaluation Form to each participant; allow 5 minutes for completion. Thank all the participants for their time, attention, and input.

EVALUATION

CRITERIA

Scoring consists of simply comparing responses on the Participant Evaluation Form to the responses listed in Answer Key. A score of 80% correct is considered acceptable mastery of the material. For performance below the 80% level, the training leader may wish to have the person review the copy of the training package, and retake the quiz.

ANSWER KEY

The following responses are considered correct:

1. False
2. False
3. False
4. d
5. d
6. b
7. True
8. True
9. False
10. b

The Rottier "turnover notebook" style of instructional package for individual learning

The Rottier manual conveys basic information in a "turnover notebook" fashion. The manual would be provided to line supervisors as part of an initial orientation period. Information provided in such manuals would be specific to the facility designing the orientation. Therefore, this manual is presented as an example of an orientation manual and is not intended to be used without revision.

The manual was developed by Dorothy A. Rottier as a project for her master's degree in vocational rehabilitation from the University of Wisconsin-Stout in 1980. It is not available commercially.

A TRAINING MANUAL FOR WORKSHOP SUPERVISORS

I. Purpose of Rehabilitation Workshops

II. Role of the Workshop Supervisor

III. Confidentiality

IV. Rehabilitation Programs Offered in Workshops

- A. Evaluation
- B. Work Adjustment
- C. Placement
- D. Sheltered Employment
- E. Work Activity

V. Wage and Hourly Certificates

VI. Subcontract Work

VII. Time Studies

VIII. Training Clients

IX. Observing and Recording Behavior

X. Quality Control

XI. Production Records and Inventory Control

XII. Safety

XIII. Professional Communications

XIV. Summary

XV. Resources

The guide provides a general description of each topic, followed by suggestions for supplementary information to be supplied by each individual facility. The format chosen to relay this additional material is optional. Individual meetings with staff members possessing expertise in specific topic areas may be beneficial, though time-consuming. An alternative approach would be to gather the information in written form and incorporate it into the guide following the appropriate chapter.

I. Purpose of Rehabilitation Workshops

Workshops help handicapped and disadvantaged people improve their ability to work. Many have little or no work experience and would be unable to gain competitive employment in the community. Others may have a strong work history which was interrupted by an injury and, due to the injury, need to seek a new occupation. For all clients, the workshop provides vocational services. The workshop is also a business entity which supplies a realistic work environment for the handicapped individuals.

Populations served within specific workshops may vary. The clients may be limited to one disability group or could include a wide range of individuals with physical, mental, emotional, or social problems.

Many workshops are private non-profit organizations operated by a Board of Directors. This group of directors supervises the Executive Director of the facility, sets policies, and assures that the workshop meets set standards.

To be certain that facilities supply effective services to clients, the Commission on the Accreditation of Rehabilitation Facilities (CARF) has established standards for workshops. A CARF survey team can be asked to use these standards to review a facility. If all areas of the workshop are functioning adequately, the CARF team issues accreditation certificates for up to three years.

Specific Facility Information to be Discussed:

1) Population served
2) Role of Board of Directors
3) Role of Executive Director
4) CARF certification status

II. Role of Workshop Supervisor

The workshop supervisor is the staff member who has the most client contact. Responsibilities include working as a member of a team to serve the needs of the clients and the workshop as a whole.

The person in this position has duties which involve both training work skills and behaviors and assuring that quality standards and production deadlines are met.

The workshop supervisor acts as a model for the clients. The manner in which the supervisor dresses, acts, and interacts with others serves as an example of how a worker should present himself in a competitive employment setting.

One of the goals of the workshop is to provide a realistic work environment (Greenleigh, 1975). The workshop supervisor is the boss or the authority figure on the work floor. He or she is responsible for training clients not only in appropriate work skills, but also in proper work behaviors. Efforts need to be made to assure that clients are corrected when errors are made, and even more importantly, praised for positive performance. Each client has an individual plan which outlines specific goals and methods to be used to reach those goals.

Production responsibilities involve organizing work stations, following safety guidelines, quality control and inventory control. The workshop needs to operate as a business entity with many of the same demands as a business. By building a reputation for quality products, the workshop can become a reputable part of the business community.

A delicate balance needs to be developed in determining how much of a workshop supervisor's time should be spent in training clients compared to time spent in checking for quality and completing production records. As a supervisor becomes familiar with the clients and the subcontract work, he or she can estimate individual training time needed and weigh this with the deadlines to be met. Although this can be a frustrating balance to attain, the challenge of meeting the dual demands can be the most satisfying and rewarding aspect of a workshop supervisor's job.

Specific Facility Information to be Discussed:

1) Job description of the workshop supervisor
2) Organizational chart

III. Confidentiality

Workshops have strict confidentiality policies. This safeguards the client's right to privacy by requiring that staff not disclose any information concerning the client to unauthorized persons. Each staff member has a personal responsibility to respect the client's rights.

A file is kept for each client receiving services. It contains medical, social, and psychological information pertaining to that individual. Often the workshop supervisors will not have access to the files. All information that the supervisor needs about a client will be supplied by that client's counselor. This protects the client by providing personal information to only the person in charge of his/her programming.

According to the Privacy Act of 1974, also known as the Buckley Amendment, individuals are permitted access to records maintained by agencies receiving federal funding (Lyman, 1978; UW-Stout, 1976). This law applies to clients being served in rehabilitation facilities receiving federal monies. Important information supplied by the workshop supervisor may be entered into an individ-

ual's file by a counselor. Accuracy in reporting and recording observations is vital because the file is open to review by the client.

Specific Facility Information to be Discussed

1) Confidentiality policy
2) Access to client files
3) Form used to provide client information to the workshop supervisor

IV. Rehabilitation Programs Offered in Workshops

Each workshop has a specific mission or goal. Depending on this goal, certain rehabilitation programs may or may not be a part of the facility's operation.

Five specific programs commonly found in workshops are Evaluation, Work Adjustment, Placement, Sheltered Employment, and Work Activity. The role of the workshop supervisor is briefly mentioned in regard to each program.

A. Evaluation Program

Most clients entering a workshop for the first time will begin in the evaluation program. The goal of the evaluation process is to assess the person's strengths and weaknesses, and determine his/her maximum potential for vocational functioning.

A referring counselor supplies background information about the individual, and asks specific questions that need to be answered during the course of the evaluation.

Throughout the evaluation period, certain procedures are used to gather information about the client's skills and abilities. The evaluator may administer psychometric (paper-and-pencil) tests and work samples. Actual performance and behavior on production work can be observed while the person works on various jobs in the work area. Observations and recordings are completed by the workshop supervisor to assist the evaluator in accumulating vital information about how the client functions as a worker.

The evaluator compiles all the data, and outlines recommendations for the individual. These might include one of the following: Work Adjustment Services, Placement Services, Competitive Employment, Sheltered Employment or further training or education. A staffing is held to exchange information with the referring counselor. A written report is then completed, detailing the evaluation process and the results.

Specific Facility Information to be Discussed:

1) Referral agencies
2) Psychometrics used
3) Work samples used
4) Use of production work within the evaluation process

B. Work Adjustment Services

Following an evaluation, certain clients may enter a work adjustment program. Work adjustment focuses on increasing or decreasing specific behaviors to better prepare a person for competitive employment. The maximum time period for those involved in this program is usually twelve months. During this time, work adjustment might also include skill training in a specific occupation to provide the client with a marketable skill.

During the evaluation, specific limitations may have been noted which interfere with the person performing a job successfully. In adjustment, a plan is developed which outlines methods to change specific behaviors. The workshop supervisor again plays a vital role in carrying out parts of the behavior change plan and observing the results. Any ideas that are contributed on how to improve the person's behavior within the production setting can serve as guidelines in developing the plan. Observations and recordings from the workshop supervisor serve as documentation of progress within the program.

It may have been decided that the client has certain needs which can only be met off the work floor. This person may then be involved in classroom activities and only participate in the work program part-time. Examples of additional services might include driver's education, job-seeking skills, or grooming classes. A schedule is devised to meet each client's individual needs.

Specific Facility Information to be Discussed:

1) Referral agencies
2) Examples of current adjustment plans
3) Behavior change techniques used
4) Special services available to clients
5) Use of production work within the adjustment program

C. Placement Services

A placement program assists job-ready clients in attaining competitive employment in the community. Efforts are made to find a job which matches a client's interest and abilities.

The placement staff spends time contacting local businesses and developing relations between the facility and the community. Concentration is placed on providing qualified employees to local companies. After a client is placed on a job, the staff keeps in contact with the business and the client to assure that the placement is successful.

The client in the placement program may need time off the work floor to visit local businesses to complete job applications and to interview for positions. Observations noted during working time are important to the placement staff to use in finding the suitable job for the individual.

Specific Facility Information to be Discussed:

1) Referral agencies

2) Placement process
3) Use of production work within the placement process
4) Follow-up procedure

D. Sheltered Employment

A sheltered employment program provides paid employment for an indefinite period of time to individuals who are unable to be competitively employed. A percentage of the established minimum wage is guaranteed to these clients. If their production rates fall below this percentage, the workshop subsidizes their pay to meet that percentage.

Each client has a case manager who is responsible for developing plans to improve the client's work skills and work behaviors. The workshop supervisor makes observations and records significant events. This information is used to develop the client plan and to monitor its effectiveness. Periodic reviews and reports are completed to document the individual's progress within the program.

Specific Facility Information to be Discussed:

1) Established production rate for sheltered employees
2) Funding agencies
3) Criteria for entrance and termination in the program
4) Examples of sheltered employees plans

E. Work Activity Program

In a work activity program, the actual production of an individual is called "inconsequential." This means the production rates are likely to be lower than that of clients in other programs and the person may be involved in activities besides work.

A work activity program may include classes in remedial reading and mathematics, physical fitness, socialization, and cooking. Leisure activities and crafts may also be provided as part of the program.

Although work may not be the primary emphasis for these clients, efforts are made to increase work skills and improve work behaviors. By dividing tasks into small increments, a gradual improvement in skills can be accomplished.

Each work activity client has a case manager who is responsible for outlining a program plan for that client. These individual plans are developed and monitored with the assistance of the workshop supervisor. All observations and recordings are used to design appropriate objectives that can be worked on with the client. Periodic reviews and reports are completed to document the client's progress.

Specific Facility Information to be Discussed

1) Funding source(s)
2) Services provided by the work activity program
3) Examples of work activity client plans
4) Use of production work within the work activity program

V. Wage and Hour Certificates

Department of Labor Certificates are necessary to legally pay workers less than the established minimum wage. There are five categories of certificates that may be required for a facility operation. These are evaluation, training, work activity, sheltered work and individual certificates (Corthell, 1980).

The evaluation certificate covers a client for no longer than six months. Each individual is paid based on his/her rate of production. Non-work activities result in no pay for the client.

A training certificate covers a period of no longer than twelve months. During this time a client must be in a training program. Curriculums are necessary for any non-pay activities to verify that skill training is occurring. This certificate cannot be used to displace other employees that would normally be performing the work that the client is being trained to perform.

A work activity certificate is needed if clients average from 0-25 percent of minimum wage. The work done is not the primary emphasis of the client's programming. A separate set of records and separate staff are needed for a Work Activity Center within a facility. Curriculums are needed to detail activities provided when the person is not in work.

An entire facility could function with a sheltered workshop certificate, or this may apply to only a portion of the population of a workshop. A certain percentage of minimum wage is guaranteed to each employee in this program. This might range from 50 percent to 90 percent of minimum wage. Pay would still be based on production rates; however, if the client falls below the established percentage, the workshop is responsible to subsidize the needed amount to raise the person's wage up to the certificate rate.

Individual certificates can be obtained which allow a facility to pay as low as 25 percent of minimum wage. Each person's name and disability must be documented and the disability must cause severe limitations to the person's production rates.

Specific Facility Information to be Discussed:

1) Certificates currently held
2) Rate of pay for sheltered employees

VI. Subcontract Work

Businesses contract with other companies to do portions of their production for several reasons. Storage space is often at a minimum; so it is helpful to have extra space for their products and supplies. A business may lack enough employees to complete a job or it may be financially beneficial to have others produce an item instead of using highly paid employees to perform the work.

Workshops provide a needed service by performing subcontract work. Industry looks to workshops to provide quality work in repetitive jobs.

The quality of the product is of primary importance to the company. If delivery deadlines are consistently met, the workshop can build its reputation as a reliable business enterprise. Price is another reason companies do subcontracting with workshops. Help can also be provided for emergency runs for which a business may not have the personnel to complete on its own (Corthell, 1980).

The workshop supervisor is in the perfect position to aid the facility in building positive public relations with the businesses that subcontract work by assuring quality and on-time delivery of products.

Specific Facility Information to be Discussed:

1) Process of obtaining subcontract work
2) Businesses that subcontract from facility

VII. Time Studies

Time studies are done in workshops to determine the amount of money a client will earn for the work he/she completes. A standard rate of pay per unit is then established for each task. The first step is to assure that a work station, including any necessary supplies, is efficiently organized to provide the most effective setting for accurate, fast production.

Varying methods may be used to calculate piece rates. The following steps provide an example which can be followed to attain accurate rates:

1) Set up efficient, organized work station.
2) Have at least three non-handicapped persons with "average skills and abilities practice performing the task for as long as they wish until each person feels that they have developed a smooth working rhythm" (Caddick, 1968). Staff members are often asked to participate in the time studies.
3) Time each person for exactly 50 minutes. Records need to be kept of exactly how many units are produced by each person during the 50-minute period.
4) Calculate the average number of units produced by the three people.
5) The 50-minute period is regarded as one working hour to compensate for fatigueability, breaks, and other factors which prevent a worker from functioning at a maximum level in an eight-hour day.
6) Using the one-hour as a numerator, develop a fraction with the average units per hour being the denominator.
7) Multiply this fraction by the wage per hour that a worker performing this job in the community would be paid (the prevailing rate).
8) Multiply the two fractions. The number arrived at will be the piece rate, the amount of money a client will be paid for each unit completed.

Example:

Step 3 Person #1 produces 200 units in 50 minutes.
Person #2 produces 300 units in 50 minutes.
Person #3 produces 400 units in 50 minutes.

Step 4 Average produced = 300 units

Step 6 300 units in 50 minutes becomes

$$\frac{1 \text{ hour}}{300 \text{ units}}$$

Step 7 If the prevailing rate paid is $4.20 per hour, your second fraction is:

$$\frac{\$4.20}{1 \text{ hour}}$$

Step 8 $\frac{1 \text{ hour}}{300 \text{ units}} \times \frac{\$4.20}{1 \text{ hour}} = \$0.014 \text{ per unit}$

Determination of accurate piece rates can be a complicated process. Caution should be taken to assure rates are correct. More in-depth information on this topic can be found in the publications by Caddick (1968) and Iverson (1978). (See Chapter XV).

Specific Facility Information to be Discussed:

1) Method of setting rates
2) Minutes of Wage Review Committee meetings
3) Prevailing wage information

VIII. Training Clients

A significant portion of the workshop supervisor's time is spent in training clients to produce quality items. Depending on the disability, a client may need work station modifications, written instructions, prompting, or one-step directions.

One approach in preparing to train is for the workshop supervisor to actually perform the task several times. A written task analysis, a step-by-step breakdown of physical movements necessary to complete the job, should be completed. Not only will this written account be useful with slow learners, it can be filed and referred to if the same, or similar, jobs return to the workshop in the future. It also serves as a reference sheet for other staff in the absence of the workshop supervisor.

Training requires patience and creativity. Immediate feedback should be given to the client as the steps are performed. Praise and/or constructive criticism are fundamental to the learning process. If one teaching technique fails, try a different approach. Possibly demonstration of the motions would be more successful than verbal or written instructions. Modeling a person's hands to model the necessary movements may be beneficial.

As training progresses, feedback should continue. Graphs, charts, or listings of daily piece rates may be motivators and act as immediate reinforcers for some clients. Records of the techniques which work best with individuals serve as resources for training in the future.

Specific Facility Information to be Discussed:

1) Amount of training time required of the workshop supervisor
2) Training techniques currently being used
3) Examples of task analyses

IX. Observing and Recording Behavior

Throughout the descriptions of the various workshop programs, emphasis was placed on the observing and recording of client behavior. The workshop supervisor is the staff member with the most direct client contact in the workshop and is therefore in the position to gather the most information about the client in the work setting.

Observing and recording behavior provides a means of gathering information and determining if treatment methods are effective. By immediately writing down significant events about a client, there is less error when trying to recall what actually happened. These notes can be used to establish a pattern of how an individual handles situations within a work setting. The information is valuable to the other staff members who need detailed information to write their reports and to update the client plans. It is also helpful for the workshop supervisor because the information will be used to develop more effective, workable client plans on the work floor.

Certain situations provide important information about a client. Reactions to new jobs, amount and type of training needed, reaction to praise and/or criticism, and responses during special events, such as tours or fire drills, may supply worthwhile data as to how the client would function in a competitive work place.

Recordings should be brief, concise, and understandable. Remarks including the behavior and the situation in which the behavior occurred will be more complete and comprehensive. A test of writing intelligibly is to have staff members who did not see the behavior read the supervisor's notes and relate what they think happened. It will be readily apparent whether the recordings listed behaviors or interpretations. Personal interpretations and judgments are best left out of the notes. Remarks should address the behavior and the situation, not the "why" of the behavior.

Specific Facility Information to be Discussed

1) Observation and recording techniques used
2) Forms used for recording

X. Quality Control

The primary reason businesses rely on workshops is to provide quality work in repetitive tasks. This presents a somewhat ironical situation. Industry attempts to keep errors in quality below five percent. However, if one item is delivered from a workshop with an error, it could easily be said: "Well, what do you expect? It was made by handicapped people." Because of this stereotyping, the production errors in a workshop need to be kept at the barest minimum.

Each facility has set standards for quality control stating how often items need to be checked on each job. When training a client on a new task, checks should be one-for-one on every item. The sooner an error is noticed, the more quickly it can be corrected. A workshop supervisor can gradually develop a system for checking which fits into the daily routine. Familiarity with each task decreases the time spent in checking items. Another client could act as a quality control inspector and check the first person's work. Care is needed if this is done; the workshop supervisor must remember to check the inspector's accuracy.

Specific Facility Information to be Discussed:

1) Process of determining number of quality control checks needed for each task
2) Detailed listing of quality checks for each task

XI. Production Records and Inventory Control

Complete records are necessary to pay clients correctly. Time required to complete each task must be watched closely and written down immediately. The number of items produced on a piece-rated job is essential to know what the client earned.

If counting completed products is difficult for some clients, tally marks may be useful. Mechanical counters are available, which automatically add one number to the counter when a small lever is depressed. A person who understands a one-to-one relationship can easily be instructed in the use of these counters. The workshop supervisor may need to check the production totals to assure accuracy in wages and inventory records.

Many on-going jobs can be simplified by devising an inventory record for parts and completed products. A perpetual inventory, updated at the end of each day, provides a useful list of products ready to be shipped and a reference sheet for parts that may need to be ordered. This also serves as a guide for monthly and annual inventory reports.

Specific Facility Information to be Discussed

1) Production records
2) Inventory control

XII. Safety

A workshop must meet certain safety standards. Many precautions which decrease the possibility of an accident are basic commonsense. Objects in aisles, blocked fire extinguishers, and sharp machinery without guards are examples of noticeable hazards.

A workshop supervisor needs to learn to be attuned to more than the "obvious" safety hazards. If working with individuals on medication, find out from the counselors if special precautions need to be taken on the work floor. When a client is learning a task for the first time, especially if it involves machinery or sharp objects, make sure the added supervisory time is available.

A helpful practice is to do a routine check of work stations each time one enters or crosses the work floor. The time spent in thinking up ways of making each work station safer will save in the amount of accidents to be dealt with later.

Safety glasses and ear plugs should be available to the clients. The workshop supervisor serves as the model for the clients in the use of safety equipment.

Specific Facility Information to be Discussed

1) Safety standards
2) Safety equipment available
3) Fire, tornado, and disaster plans
4) Accident report forms

XIII. Professional Communications

The workshop supervisor acts as a resource person for the counselors. A supervisor's observations of client behaviors are essential for their reports and staffings. The supervisor can assist the counselors in learning about the subcontract jobs which increases the meaningfulness of the supervisor's recordings. In the same way, the supervisor needs to be familiar with the various programs and services to understand why observations are needed and what kinds of information are most helpful. A workshop supervisor might be more motivated to write observations if he/she knows how the information is used. Possibly reading a counselor's report or attending a staffing will clarify the overall process occurring within a workshop program.

When working as a member of a staff to reach a common goal, it becomes each person's responsibility to make the working relationship within the group as smooth and functional as possible. Respect for each other can increase the morale and communications within the workshop. The interaction between staff members sets an atmosphere which clients can model with their peers.

Specific Facility Information to be Discussed:

1) Formal and informal communication systems
2) Opportunities for learning more about other staff members' responsibilities and the overall process occurring in the workshop

XIV. Summary

A beginning workshop supervisor can approach the job in many ways. Suggestions follow which point out important factors in performing this job effectively.

1. Know the subcontract jobs. The best way to do this is to do the job yourself several times. Study the steps involved in each task. Learn the correct names for all items so you can refer to the pieces clearly and consistently.

2. Know the client. Each person has individual needs and an individual learning style. By pinpointing a client's strengths and weaknesses as a worker, important factors as to how the person learns best can be determined.

3. Organize your time. Be realistic when determining how many clients you can train at one time. Remember that training requires not only one-to-one supervisory time, it increases the amount of recordings that are necessary.

4. Beware of becoming too comfortable. When training stops, a large portion of the learning process stops. If a supervisor relies on only one client to perform a task, problems can increase when that client is absent from work. Have back-up workers trained for each position.

5. Attempt to set up jobs so the smallest chance for error is avoided. Think about what could possibly go wrong and devise methods to prevent errors before they occur.

6. No awards are given for the lengthiest recordings on clients. Brevity, conciseness, and completeness are the important factors.

7. Train back-up staff members in your duties. It provides a peace of mind when gone on vacation to know that others are capable of keeping your paperwork up-to-date.

8. Avoid comparisons of your work load with other staff members. Each person has a variety of duties and it it easy to think the other person has the easier job.

9. Learn to appreciate even the smallest amount of progress a client makes. It is all the small steps of improvement that add up to a satisfaction and a pride in being a workshop supervisor.

The RATES Modules developed for either individual or group learning

The following module and instructional activities are part of a multiple topic package for in-service training developed by Ellsworth Community College in Iowa Falls, Iowa. RATES (Rehabilitation Associate Training for Employed Staff) contains modules in the areas of behavior modification and management. RATES focuses on the knowledge and skills necessary for bringing about change with disabled clients. RATES modules are printed and distributed by the Materials Development Center.

HUMAN SERVICES PROGRAM

ELLSWORTH COMMUNITY COLLEGE

REHABILITATION ASSOCIATE
TRAINING FOR EMPLOYED STAFF

Introduction to Systematic Instruction (RA-1)

MDC PRINTED AND DISTRIBUTED BY:
MATERIALS DEVELOPMENT CENTER

Stout Vocational Rehabilitation Institute
University of Wisconsin-Stout • Menomonie, WI 54751

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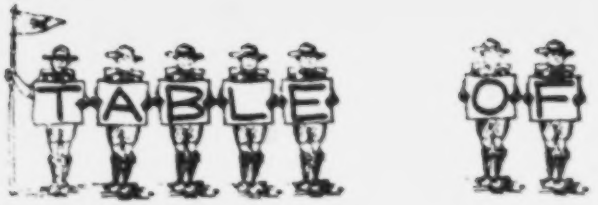
The Materials Development Center is partially
funded by the REHABILITATION SERVICES ADMINISTRATION,
U.S. DEPARTMENT OF EDUCATION, Washington, D.C.



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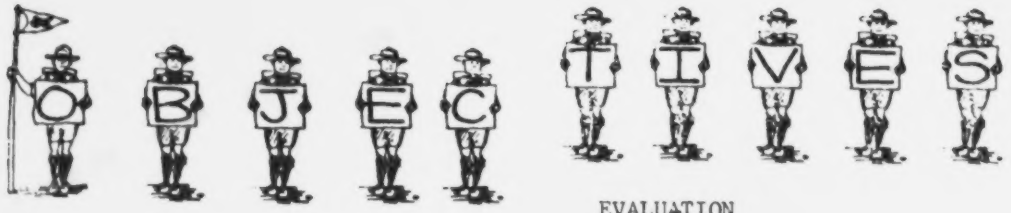

	BEHAVIOR	EVALUATION
1	List the steps in systematic instruction.	Class Test
2	Describe the role of the IPP in systematic instruction.	Class Test
3	Determine whether or not short-term objectives have been written correctly.	Class Test. Will be given 10 short-term objectives to make determinations of.
4	Describe 2 reasons for the use of task analysis.	Class Test
5	List 2 reasons for the use of measuring behavior in implementing a systematic instruction program.	Class Test
6	List 2 reasons for gathering baseline data before implementing a program.	Class Test
7	Determine behavior principles being illustrated in specific situations.	Class Test. will be given hypothetical situations identifying behavior, procedures and effect . . . and must make determinations.

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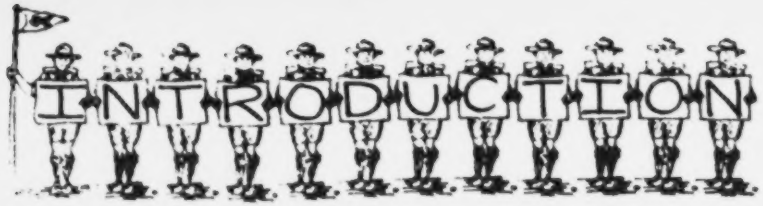


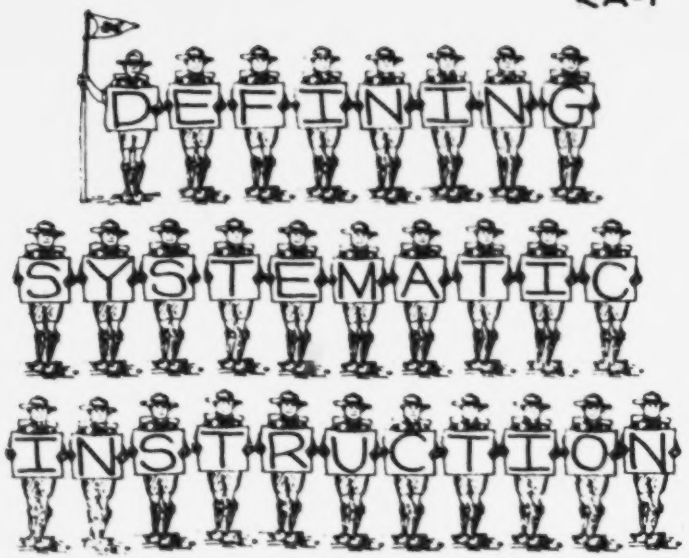
Many professions follow what can be called "standard operating procedures" which outline general steps to follow in accomplishing their respective tasks. For example, Emergency Medical Technicians are instructed to follow the "A-B-C's" (Airway, then Breathing and then Circulation) in establishing priorities for treating accident victims. Mechanics, surgeons, construction workers, etc. all have general guidelines to follow which experience has shown to provide the most efficient and effective operations.

Systematic Instruction procedures are the "standard operating procedures" for behavior technicians. They are steps and guidelines that experience has shown to be most effective in client training. As in the other professions, they are *general* procedures around which more *detailed* principles are built. They provide the framework around which to do good training.

This module is an introduction to this format for client training. It will provide you with a basic understanding of the important features of Systematic Instruction, including what objectives should look like, the purposes of task analysis and data collection and the principles of learning.

Completing this module will not make you an instant expert in any of the above topics. The module is intended only as an introduction, a chance to learn or review some of the concepts and language needed for this as well as other training courses. More detail on specific components is covered in other modules (i.e., Task Analysis, Behavior Observation and Measureme

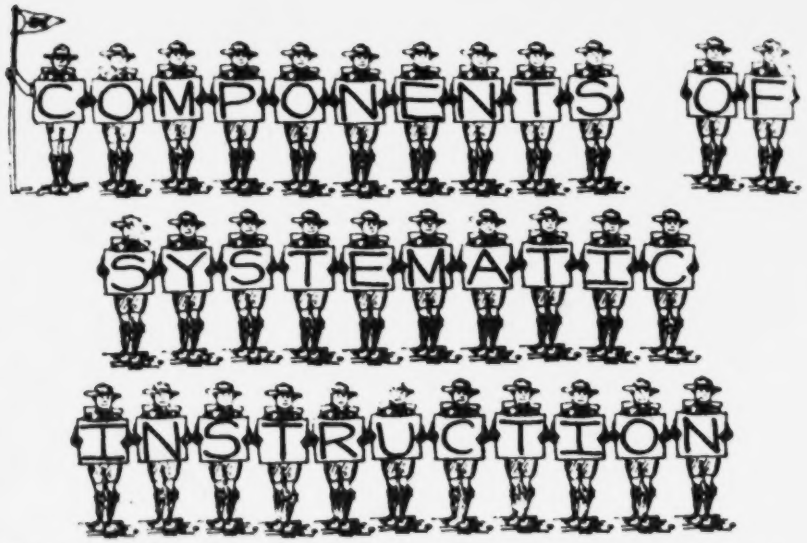
8 *Systematic Instruction refers to procedures for standard operating behavior technicians.*



The first thing we ought to do is describe what Systematic Instruction is *not*. Systematic Instruction is *not* a curriculum or set of materials. You and I both know that different clients are working on different objectives and have different needs. Systematic Instruction is *not* a set of procedures that will automatically get every client to follow directions and work hard. Again, you and I both know that different clients work for different reasons and no one set of methods works for everyone.

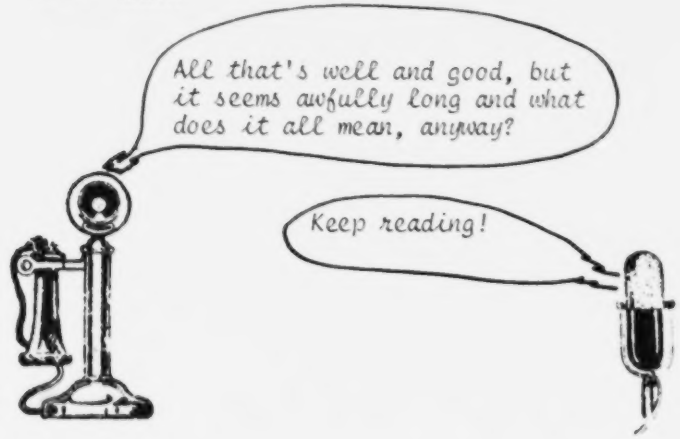
Well then, what is it? *Systematic Instruction is a philosophy and a process.* It is the philosophy that when someone has a behavior problem or handicap, the best way to deal with it is to directly teach or improve skills needed to overcome it. It is a process that leads you through a series of steps to ask the questions and make the decisions which will lead to the most effective and efficient teaching procedures for your clients.

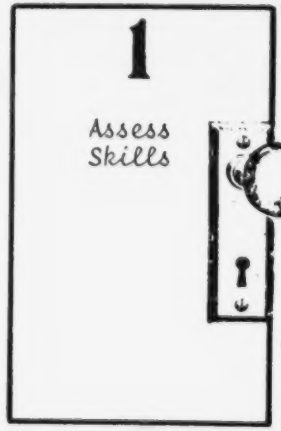
We have given names to the steps, or components, of the Systematic Instruction process to make it easier to communicate. Don't worry about the name; look at the function of each component. You may find that you are already using much of this process, although you may call it something else.



Whatever you call it, Systematic Instruction includes the following steps:

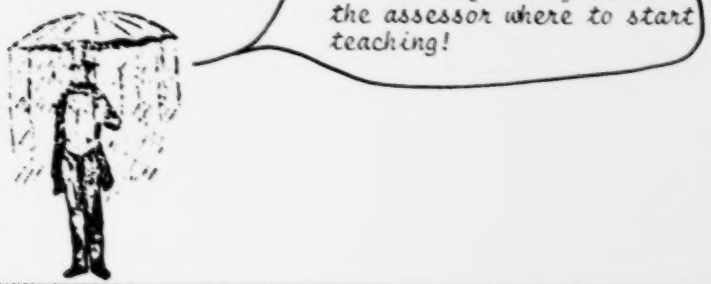
1. *Assess skills which the client has.*
2. *Use the Individual Program Plan (IPP) process to determine the long-term goals and short-term objectives necessary to reach the goals.*
3. *Where the short-term objective involves learning or improving a skill, task-analyze the skill into its necessary components.*
4. *Choose a practical and useful way to measure the behavior.*
5. *Measure the behavior to determine its baseline level.*
6. *Assess the environment in which the behavior is to be used.*
7. *Establish and write an instructional procedure.*
8. *Implement the procedure and assess its effect on behavior.*
9. *Modify the plan if necessary.*
10. *Establish programs to maintain and generalize the learned skill.*
11. *Communicate the results to people who should know.*





When a client enters your facility, s/he already has a label pinned on: *retarded, low functioning, mentally ill, alcoholic, behavior problem, physically disabled.* The list is almost endless. What does the label tell you about the client's skills? Not much. You have probably seen the severely retarded client with an I.Q. of 28 who can't talk, who *looks* severely retarded, but who can perform all necessary hygiene tasks and who attends to his assigned tasks for long periods of time and works conscientiously and carefully. You may have seen another client with the same label who *can* talk, but she wanders around aimlessly. In order to know what to teach, you need to know the client's skills, strengths and weaknesses.

Remember in assessment that a skill deficiency does not mean a limit (except in clear cases of organic problems, such as blindness or loss of limb). A skill deficiency nearly always means *an opportunity to teach*. Thus, assessment is not for the purpose of discovering limits, nor is it for assigning people to jobs within their present capabilities. It is for finding out what skills clients still need to learn and where to start teaching



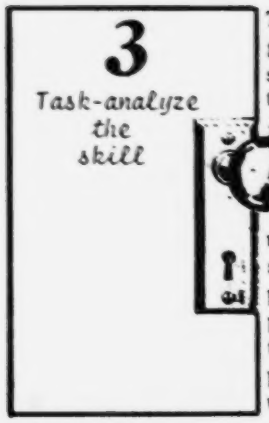
2 *Determine goals and objectives*

If your agency is accredited, it already has a procedure for preparing goals and objectives for clients. This is a transdisciplinary procedure in which the client is involved as well as at least one staff member. In addition, parents, therapists, counselors and other staff members may be part of the team. Goals and objectives are determined by the team. They are negotiated, not dictated.

The goals and objectives should be based on the assessment of the client's wishes. Long-term goals are the guides by which staff and clients determine where they are going. They provide a consistent viewpoint for developing programs. The establishment of long-term goals is like taking a trip. First you figure out where you are; that is the purpose of assessment. Then you decide where you want to go; that is the purpose of long-term goals. As Mager (1962) said,

When you teach, *the assessment information tells you where you are. The long term goals describe where you are going.* Where you are going is the business of the IPP process. The goals are determined by a whole team, not by any one person. The client and, if appropriate, his/her guardian describe what they want the goals to be. Therapists and other professionals propose goals which they feel to be important. The instructors/trainers/supervisors who work with the client each day tell what they feel are important goals for the client's daily functioning. Then the whole team negotiates and sets priorities which will guide the rest of the Systematic Instruction process for that client.

From the long-term goals you need to establish short-term objectives. *Short-term objectives are those behavior changes which need to occur on the way to reaching long-term goals.* Short-term objectives are usually those which you think can be reached in about 90 days. They build on each other on the way to the long-term goal.



The clients we deal with often have great difficulties in learning new skills. Many of the skills they are to be taught must first be broken down into small, teachable steps. These steps must be sequenced in both a logical and effective order. For example, the task of bolting two metal pieces together might include steps of picking up and orienting one piece on a jig, picking up a washer, putting it on a bolt, putting the bolt through a hole in the metal piece, picking the piece and bolt up, picking up the other piece and putting the hole in that piece over the bolt, picking up a lock washer and putting it over the bolt, picking up a nut and hand-screwing it on the bolt and tightening the bolt. Of course, this task might be broken down into more steps for a particular client or may be taught in only three or four steps to another client. Other behaviors such as self-care and hygiene skills, recreation skills and even social skills such as greeting a person can be broken down into teachable steps in just the same way.

There are several reasons why task analysis is useful. Task analysis makes teaching easier. It allows instruction to be adapted to the individual client's problems, barriers and skills. It provides an objective way to evaluate whether the teaching is working. It makes it easier for another person to continue the training in other settings or when the usual instructor isn't available.

Makes teaching easier: In teaching, we often give long instructions and confusing demonstrations. Then we complain that the student is too retarded to learn the skill. There have been many demonstrations that handicapped clients can learn very complex skills if these skills are broken down into a consistent and clear set of simple skills. Then, each simple skill can be taught and sequenced in a chain. When the chain of simple skills has been learned, the complex skill has been learned.

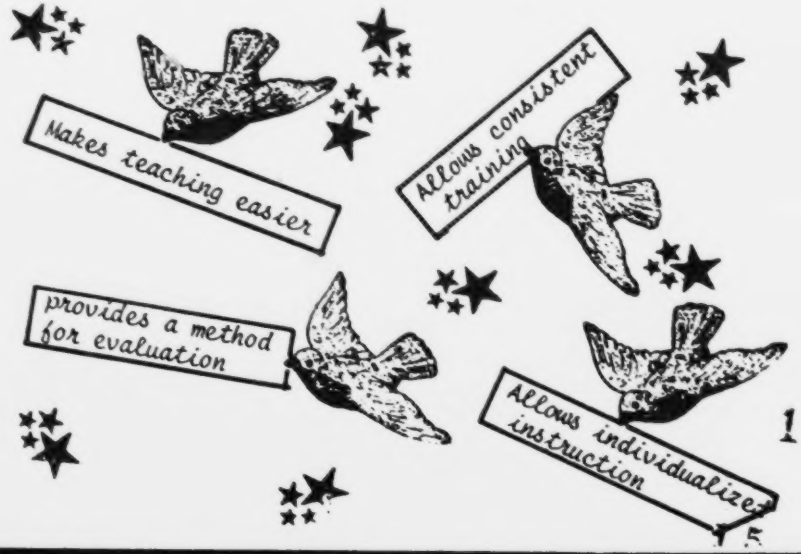
Allows individualized instruction: Task analysis shows the instructor the steps at which the client can and cannot succeed; it clarifies what subskills the client has yet to learn, i.e., what skill must be taught. It also allows clients to work at their own rate of progress.

Evaluation: Task analysis provides one way to measure a client's progress toward short-term objectives. Progress can be measured in terms of the number of steps which a client can do independently or in terms of the amount of help a client needs in order to complete steps. This type of evaluation is much more precise than simply measuring the complete task.

Allows consistent training: The task analysis makes it easier to communicate exactly which steps are being taught and how they are being taught.

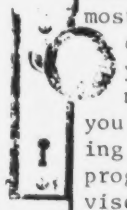
Because of these four advantages, it is often useful to task analyze skills to be taught. This may occur before or after setting the short-term objectives.

Task Analysis:

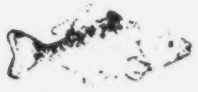


4

Choose a behavior measure



You will need to determine how to measure the progress being made by a client. There are several reasons for measuring behavior. The first and most important is *to help you make decisions* on the teaching programs you are using. Regular, frequent measurement of progress will show you whether adequate progress is being made. If it is, you continue the program. If it is not, you must revise either the program or the objective. *For example*, if a client has learned all but one or two steps in a skill but has made no progress on those steps, you may decide to break those steps into smaller steps, to provide rewards for those steps, to temporarily pull those steps out and teach them intensively or to revise the method by which the person does the task so that s/he does not need to learn those steps at all. It makes no sense to waste weeks of training only to find out that a client has not learned; regular measurement of the behavior will point out lack of progress early so that you can change what you are doing. Regular measurement will also show you when you are making progress so that you do not stop using a teaching method that works.

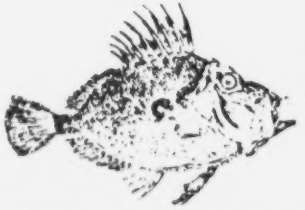


Measuring progress helps you make decisions since you can tell if your teaching methods are working!

A second purpose for measuring progress is accountability Accountability means *providing documentation that you are doing what you say you are doing*. If you establish a training program, you need to show that the training program works. In other words, your agency is being paid to do a job and must show that it is doing that job at an acceptable level. This does not imply that an agency can or should be successful in training each client on each objective. It simply means that an agency should document the progress that it makes with clients.

Measuring progress provides documentation that you are accountable!

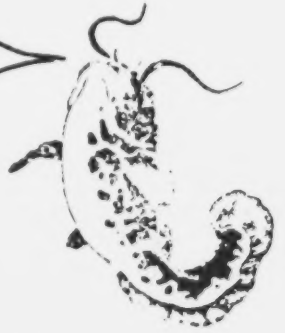
Communication among staff, parents, clients and other agencies is a third purpose of measuring behavior. When a client asks, *"How am I doing?"* or another staff member asks, *"Is John making progress?"* you can show clearly how well the client is doing.



Measuring progress aids communication among staff!

Finally, measurement of client progress is *required by accreditation standards*. Although these standards vary among accrediting boards and surveyors, they all require at least periodic direct measurement of progress on short-term objectives.

Accreditation standards require measurement of progress!



Some people see the measurement of behavior as just more paperwork. After all, aren't all agencies already understaffed and buried by regulations? Collecting data on progress does take time, but it also prevents wasting time on useless or harmful teaching and supervision procedures. Because collecting data takes time, you should follow three principles:

MOTTOS FOR MEASUREMENT

Data are for using. *If you take data, use the data.* If all you do is file it, forget it.

When taking data, *use the behavior measure which gives you the information you need.* If you are interested in speed, use rate. The most common dimensions of behavior are accuracy, proficiency (accuracy and rate combined), speed, duration and latency (lateness). Another critical dimension is how much help is required from the instructor for the client to carry out the task.

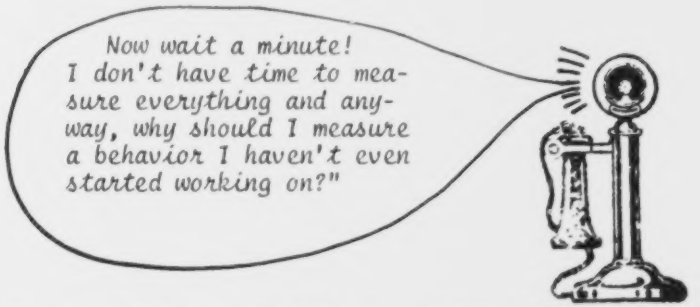
Use the easiest behavior measure you can find that still tells you what you want to know.

5

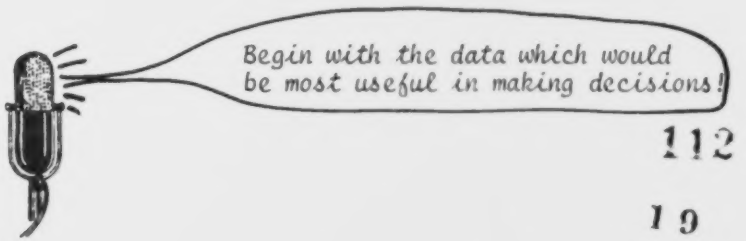
Measure the baseline level

After you have chosen a behavior measure, when, how often and for how long the behavior will be measured and who will collect the data, you begin to actually do the measurement. And *this is very important* you begin to measure the behavior before you ever try to do the training program for that behavior; i.e., you take baseline. *You begin collecting data on how accurate, fast, proficient, long or late the behavior is even before you try to change it.*

"Now wait a minute," you say. (I know you are reading this somewhere and I'm probably in my office or maybe at home, but I can hear you say it.)


Now wait a minute!
I don't have time to measure everything and anyway, why should I measure a behavior I haven't even started working on?"

You are right. You don't have time to measure all the objectives for all your clients every day. When you begin taking data, start small. Measure only one behavior the first day and go from there. Of course, you are probably keeping track of some things now, like production rates. In that case, add one new one. Which behaviors do you measure first? Remember the rule: DATA ARE FOR USING!



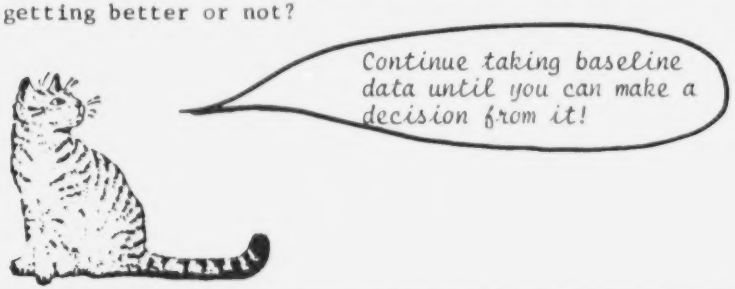
Why collect data before starting to change the behavior? Here we go again: another list! There are 3 reasons:

a *The baseline assessment lets you know where you really have a problem.* Let's say a client is often off-task and seems to be goofing around or daydreaming. You want to check his actual productivity and improve it. When you take the baseline data, you may discover that he is completing his quota of items and then waiting around for more materials. In that case, instead of working on productivity rate, you may wish to teach him how to look busy when he isn't, a critically important skill in competitive employment.

b *The only way to find out if your teaching works is to compare the behavior before you started teaching to the behavior after teaching.* Let's take the situation where you decide to work on reducing disruptive behavior and increasing production rate by a client. You may, with the best intentions, choose a method that makes these behaviors worse. But you won't know it unless you have baseline data.

c *The baseline data may help show you where to start in a program.* If a client cannot brush his teeth, he may still be able to do some of the steps. If he can consistently get his toothbrush and toothpaste, fill his glass and open the tube, you may not need to work on those behaviors. You might be able to concentrate on his skills at using the brush on the teeth. With a different client you may have to begin with the skill of identifying her toothbrush.

How long should baseline observations be? That depends. If you are teaching a new behavior and you are sure it has never happened before, try a day or two of baseline. If you are not sure how often the behavior occurs, or it seems quite variable, you may need several days of baseline. If it seems to be improving, you may want to continue baseline until it levels off or is no longer a problem. *You take baseline until you can make a decision from it.* Do we need to work on this skill or is it OK? Is it getting better or not?



6

Assess the environment

Once you have set the goals and objectives and begun to measure the behavior, you should carefully observe the environment in which the behavior should be changed. If you are teaching a new behavior, you need to look at the environment in which you want the behavior to occur. For example, if you are teaching toothbrushing, you need to look at the home environment. This is true even if you are planning to teach toothbrushing at an activity center. After all, once training is complete, you want the client to brush her teeth at home. Looking at the home environment helps you in these two ways:

a *It makes you aware of any changes which will need to be made for the newly learned behavior to continue.* For example, you might want, right at the beginning, to emphasize that the client's parents require her to do as much of the toothbrushing as independently as possible.

b *It allows you to design the training environment so that it is as close as possible to the environment in which the behavior will be used.* You may often find that you can teach the behavior right in its natural environment. For example, you may be able to teach a vocational task right at the work station, or you may be able to teach conversation skills in the break area. Even if you need a special teaching environment, it should be as similar as possible to the natural environment.

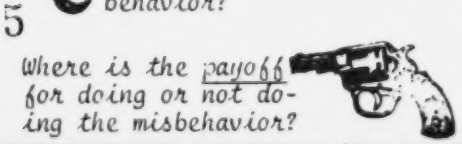
Assessing the environment shows you what changes will need to be made in the permanent environment
and how to design the training environment!

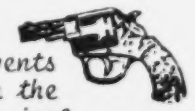
If you are trying to reduce a disruptive or otherwise unacceptable behavior, you should look carefully and try to answer these questions about the environment in which the behavior occurs:

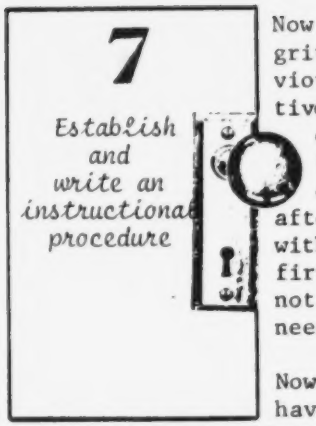
a *Is there a payoff for the misbehavior?*

b *Is there any payoff for not doing the misbehavior?*

c *What events seem to consistently trigger the misbehavior?*







Now you are ready to get to the nitty-gritty. How will we change the behavior and reach the short-term objectives? That's a good question. It is extremely important to remember this simple rule: *Plan first, then do.* Many people try one procedure after another, often naphazardly and without planning. Unfortunately, the first thing you think of is usually not the best thing you think of. You need to plan what you will do.

Now don't let us scare you. You don't have to stop and plan carefully every word you say to clients and every little thing you do. Sometimes clients do unexpected things and you have to respond to them. Many of the minor problems clients have can be handled simply and quickly. But when you are planning a way to reach an identified short-term objective which will require efficient and effective teaching and behavior management procedures, plan carefully before you start trying things.

When planning a program, follow these steps:

a *Set up a favorable environment:* If the client is easily distracted, start out in a quiet place. Then gradually move closer to the place where he needs to do the behavior.

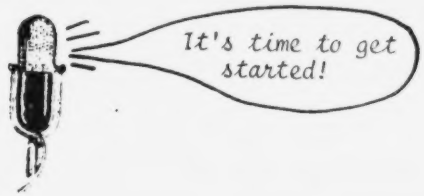
b *Provide payoffs for learning and improving.*

c *Establish a consistent correction procedure.* Know what you will do when the client makes an error.

8

Implement the procedure and assess its effects

Well, you are all ready. . . What are you waiting for? It's time to get started! As you are using the program, keep looking at the data. See if the procedure is working. Give it some time, but don't spend weeks with an ineffective procedure.



9

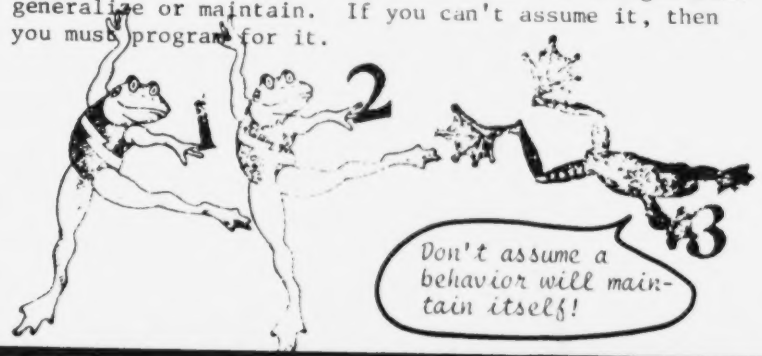
Modify the program if necessary

If the program doesn't work, revise it. If it works and you reach the objective faster than you expected, go to the next one. Pay attention to the data.

10

Establish programs for maintenance and generalization

When you spend the time and effort to teach a new skill or change a client's behavior, you want to make sure that the skill is used or the behavior maintained in the places where it is important. That means you must be concerned with whether the behavior carries over to important settings (that is, whether the behavior change *generalizes* and whether the behavior *maintains* over time. It is not unusual when working with severely handicapped people, to discover that behaviors which have been taught in one setting still don't occur in other settings. You cannot assume that behavior changes will generalize or maintain. If you can't assume it, then you must program for it.



11

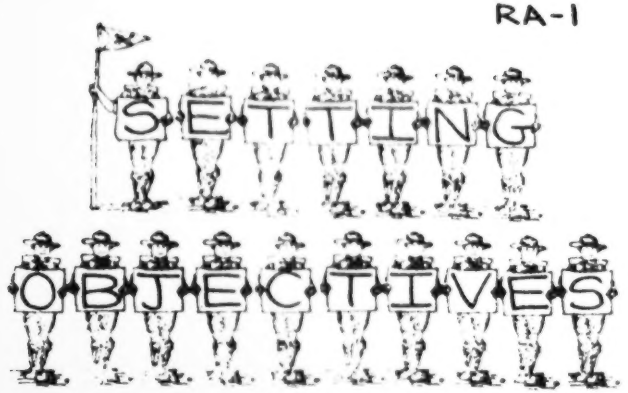
Communicate the results

Make sure that the people who need to know and who have a right to know about a client's progress find out. The best way to do this is to chart the behavior measure for each objective and share these charts at IPP meetings. Charts allow for clear visual displays of progress.

Don't just file the results away. If people (including the client) are to make decisions which affect the client's life, they need to know what kind of progress the client is making.

Now you know what Systematic Instruction is all about. You have at least some idea of what the steps in the process are and how to go about doing them. The rest of this module provides more information and some practice at identifying well and poorly written short-term objectives and at identifying examples of the principles of behavior. Even when you finish all this, you still will have gotten only a taste of the "how-to-do-it." Remember that this is only an introductory module. Everything covered in this module will be covered in more detail somewhere else, perhaps in the course you are taking now and perhaps in a different course. If it looks like we think this is all very simple and you know it isn't, you're right.

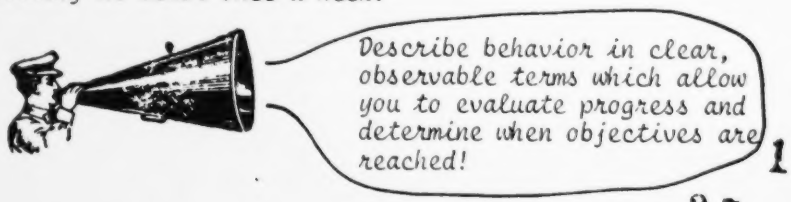
Let's see now what you have learned about the components of Systematic Instruction. Remember, when you implement a teaching program, you should also assess the effects.

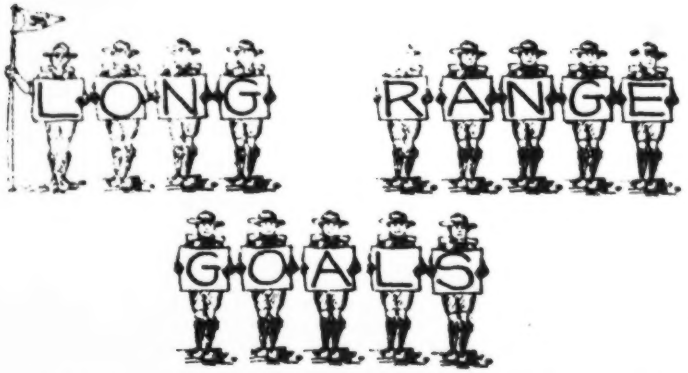


The first step in teaching a new skill or in changing a behavior is describing the desired behavior change. *Behavior should be described in a way that allows you to evaluate progress and determine when objectives are reached.* In setting objectives, you may go through a series of steps in which you specify the behavior more and more precisely.

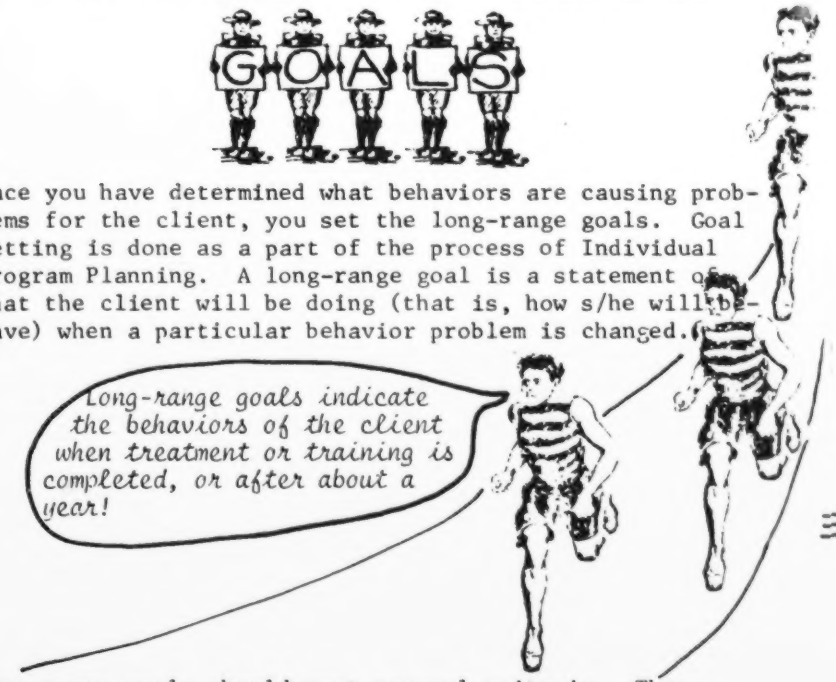
A behavior will usually come to your attention as either a *complaint* or a *goal*. A complaint is a statement that someone is doing something wrong or is behaving in an inappropriate or unacceptable way; a goal is a statement that someone needs to learn some new skill or behavior. Goals and complaints are generally stated in vague ways that do not make clear what the objectives of training should be.

When presented with a complaint, you should try to identify in clear, observable terms, what behaviors led to the complaint. If, for example, a client is labelled *unmotivated*, look for some behaviors which indicate to you lack of motivation. One such behavior for a particular client might be, *"Flora walks around the room when she should be working."* Alan might work hard during work time. However *"Alan comes in late at least once a week and misses work entirely at least once a week."*


Describe behavior in clear, observable terms which allow you to evaluate progress and determine when objectives are reached!



Once you have determined what behaviors are causing problems for the client, you set the long-range goals. Goal setting is done as a part of the process of Individual Program Planning. A long-range goal is a statement of what the client will be doing (that is, how s/he will behave) when a particular behavior problem is changed.



Long range goals should meet several criteria. These criteria will be explained briefly, along with a correct and incorrect example of each.

Criterion 1: *The statement involves action*

Verbs used are action verbs, not state-of-being verbs. A verb of action tells what someone does. For example, the verb *fight* is an action verb. *Eat* involves action. *Yell* involves action. These are different from state-of-being verbs which may involve the word *is*. For example, a person *is aggressive*. He can't *do aggressive*, but he can fight, threaten, hit or tease. In writing a behavior statement be sure to use verbs that involve action.

EXAMPLES

Action Verbs		State-of-being verbs
talk	*walk*	*be*
point	*write*	*is*
fight	*ask*	*seem*
complete	*attend*	*become*
cry	*eat*	*have*
look	*say*	*has*
give	*lift*	

Incorrect

Mary needs to be more independent on the job

Correct

Mary will get more materials when she uses up what she has.

Criterion 2: *The behavior is observable:*

It can be seen by people other than the client. For example, you may write a behavior statement such as, "*Fred doesn't think before he acts.*" Unfortunately, you cannot really see that Fred does not think. It may be important to teach him to think before he acts, but you would need to develop some way of telling whether he does think; you cannot observe thinking by itself, so you have no way of knowing whether or not he is doing it.

EXAMPLES

Observable	Unobservable
Explain	Understand
Pick up	Discriminate
Choose	Like
Ask for	Want

Donna will know how to dress herself.

Donna will dress herself without help.

Criterion 3: *The behavior is the client's, not someone else's:*

Do not write goals that start with, *"Help John to . . ."* or *"Teach time to . . . "* Simply write what the *client* will do differently when he has met the goal

To teach Donna to dress herself.

Donna dresses herself without help.

Criterion 4: *The behavior is specific; what the client does is clearly described:*

How clear is clear? Try to write clearly enough so that someone else can read the goal and show you what the client will do.

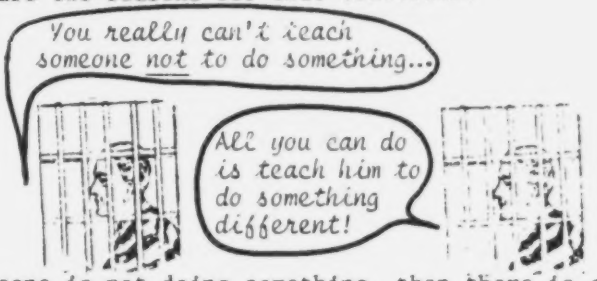
Jody pays more attention to her work.

Jody does her assigned work at the required accuracy level.

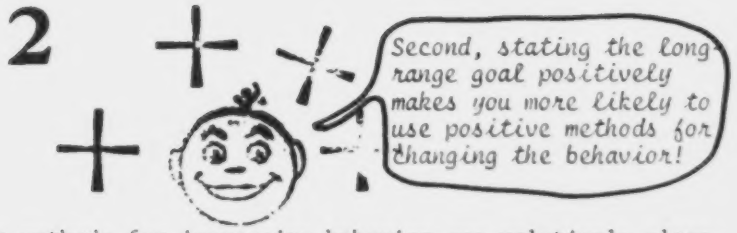
Criterion 5: *The long range goal must be stated in positive terms*, i.e., in terms of what the client will do instead of what he won't do:

There are two reasons for this criterion:

1

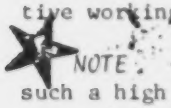


If someone is not doing something, then there is a void in time. He has to do something and what he does may be appropriate or inappropriate, adaptive or maladaptive. If someone is not fighting, he is doing something else. He might be negotiating, walking away, crying or trying to con someone else into fighting for him. You have to be sure that you target a behavior that a person can be doing.

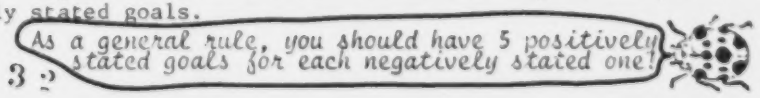

2
Second, stating the long range goal positively makes you more likely to use positive methods for changing the behavior!

Most methods for increasing behavior are relatively pleasant. On the other hand, stating the long-range goal in negative terms often leads you to punishment. If possible, you should state a long-range goal that is *incompatible* with the behavior you wish to reduce, incompatible behaviors are those which cannot occur at the same time. (*For example*, answering a problem correctly is incompatible with making a mistake on it). If you can increase an incompatible behavior, the problem behavior will automatically decrease. By targetting an incompatible behavior, you are more likely to use pleasant teaching methods than punishment.

Think about how a child learns to walk. We target *walking*, not *falling down*. We don't punish falling down. We really aren't concerned very much with how often the child falls down. We do not want to decrease falling down; we want to increase walking. A child who is first learning to walk falls down alot. That's OK, so long as the child continues to walk more and eventually begins to fall less often. The same holds true for many other behaviors. We want to increase appropriate responses to criticism, not merely decrease talking back. We want to increase cooperative working and playing, not just decrease bickering.



Occasionally, problem behaviors may occur at such a high rate or may be so severe that they must be decreased immediately. If no incompatible positively stated goal can be found, a long-range goal may be stated in negative terms, such as *"Rex will not push his thumb against his eye."* Unfortunately, it seems much easier to write negative goals than to write positive ones. If most long-range goals are negative, a program can become suppressive and oriented toward punishment; teaching of new skills may be neglected. Therefore, this handout emphasizes positively stated goals.

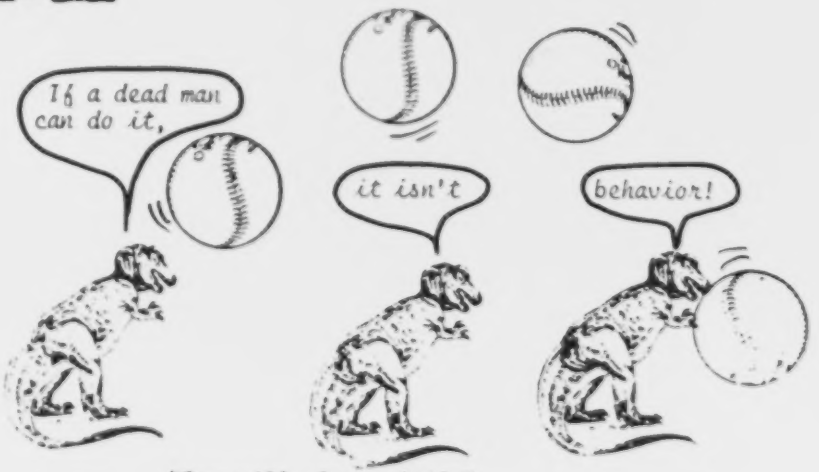


3 2

If you are not sure whether the long-range goal is stated in terms of something that the client will actually do, then you might try the dead man's test. The "dead man's test," simply stated, is *"if a dead man can do it, it ain't behavior."* For example, a man talks too much in the workshop and does not get his work done. One possible target is, *"Elmo will sit quietly."* That sounds positive, since you want to increase quiet sitting. One way to get him to sit quietly is to choke him to death (then, of course, prop him up)! Sorry, this one does not pass the dead man's test. We realize you would not really try that method of changing the behavior (although instructors and supervisors often consider it), but even if you only used a mild punishment to reduce talking out and increase quiet sitting, what does the client gain? The other clients may find it easier to work, but your client has not learned anything. A better goal would be, *"Elmo completes assigned work."*

Juliet will not date Romeo. (The negative statement here obviously does not meet the dead man's test. Remember how Juliet stopped dating Romeo? She poisoned herself!

Juliet dates boys other than Romeo.

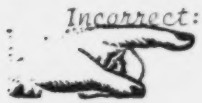


"Rex will play quietly"

3 3

Criterion 6: *Avoid the words "can," "is able to" and "learns to:"*

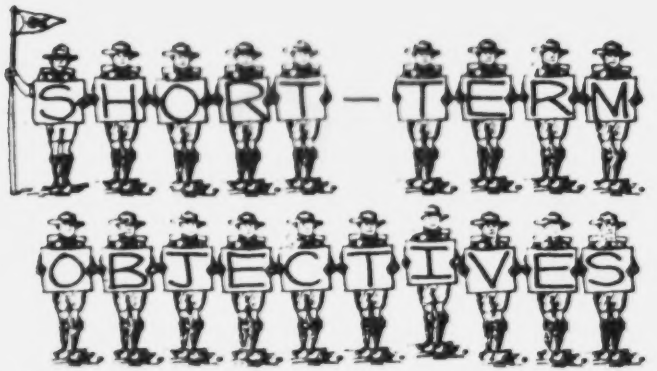
You do not want to use these in a long range goal (which is a statement of what the client will do at the end of training) because they imply that he cannot do the goal behavior now. That implication may or may not be accurate; given the right conditions, he might perform the behavior with no further training. You want to state a long range goal in terms of what the client *does*, not in terms of what he *can* do.



Sam will learn to make pallets.

Sam makes pallets.

Sam will make pallets.



For each long-range goal, there may be one or more short-term, or *en route objectives* An en route objective is exactly what the name implies; it is *an objective which must be met on the way to the long-range goal.* If you are driving from Des Moines to Iowa Falls, first you may reach Ames; if a client is learning to use the toilet correctly without reminders, s/he may first learn to use the toilet correctly when reminded to do so.

There may be several possible en routes to one goal. You can pass Ames on the way to Iowa Falls, or you may go through Colo and miss Ames altogether. In the same way, toilet training of a client may involve the en route objective of doing each step with reminders, or it may involve the en route objective of doing each step with reminders, or it may involve the en route objective of moving bowels after being placed on the toilet (but without reminders. The number of enroute objectives and what the objectives should be depends on how you will teach and how easily the client reaches each objective. If there is more than one en route objective, you must be sure that they are sequenced from simpler to more complex or from easier to more difficult.

En route objectives are written in the form of *pinpoints*. Before you begin working on an objective, it must be pinpointed so that you know exactly what behavior you are trying to get. If you do not pinpoint, you are liable to be inconsistent in your teaching. You may accept a behavior sometimes and reject it at other times, or you may give unclear instructions and prompts. Pinpointing helps you teach more consistently and efficiently.

Pinpointing is the very clear and precise definition of the behavior of interest. *A pinpoint is a behavior defined in such a way that it can be measured, with agreement between independent observers.* The criteria for a pinpoint are the same as the criteria for a long-range goal with one change and some additions. First, criterion 4 (*the behavior is specific*) needs to be changed slightly.

> Criterion 4 (revised for pinpoints): *The definition is clear enough so that other people agree on accurrences of the behavior*:

In other words, acceptable reliability (agreement between independent observers) must be found. When you first pinpoint a behavior, of course, you do not know whether you will get reliable agreement on occurrence, so that you expect observers to agree. One way to check your poinpoints is to act it out for people and to see if they can tell when it occurs. Then you just investigate reliability by having two people observe the client's behavior and comparing their recording of occurrences. When you are very experienced in defining a particular form of behavior, you have a good chance of pinpointing it on the first try; but even when you are experienced, your first attempt at pinpointing often will not produce acceptable agreement. In that case, you need to revise your pinpoint until you can get reliable agreement. It may take 4 or 5 (or more) but you'll get it eventually.

Incorrect: Melinda practices an adequate job interview.

Correct: Melinda, in a practice job interview, greets the interviewer upon entering, looks at him at least 40% of the time he talks and answers each question with at least a one full-sentence answer.

In order to observe progress, you need to pinpoint the behavior; in order to determine whether a program has been successful, you need to determine the amount of change in the behavior which will satisfy the client's needs. The purpose for setting objectives is to clarify when the pinpointed behavior should occur and what criterion of performance will establish that the behavior change program is successful.

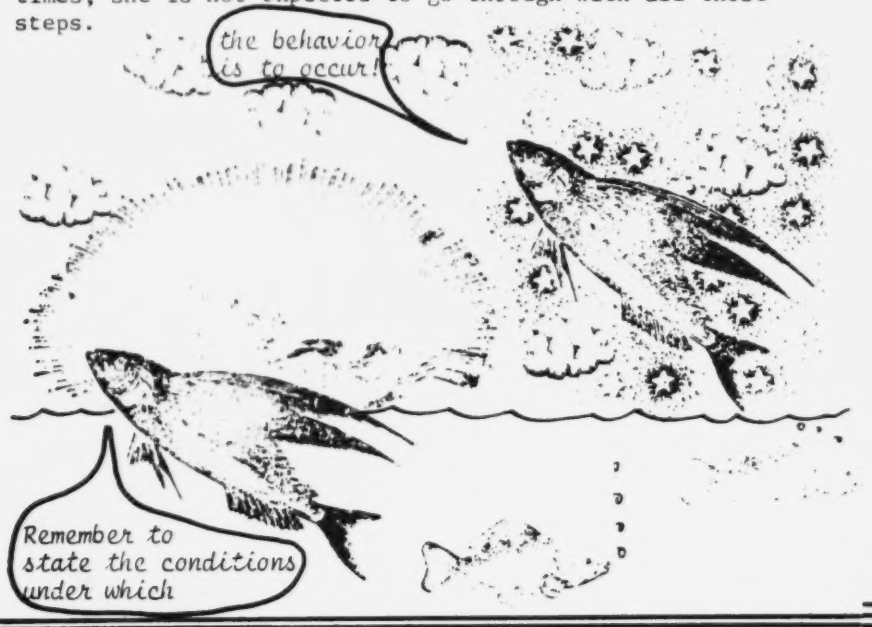
The main component of an objective is the pinpoint. In addition to the pinpoint, an objective should contain two other elements:

> Criterion 7: *The conditions under which the behavior is to occur are stated*:

Some behaviors are appropriate under some conditions, but not under other conditions. For example, a man who washed his hands over and over would be viewed as a little strange; people might even label him a "compulsive hand washer." However, washing hands is desirable under conditions such as *after going to the bathroom, after working in the garden or within two minutes before coming to the dinner table.* Yelling on the ball field is part of playing, but yelling in the workshop is usually considered inappropriate.

Some behaviors are desirable under most conditions, but attempts to change the behaviors are limited. For example, a woman might be generally friendly and cooperative. However, when a request she makes is refused, she may throw rather violent tantrums. The target may involve negotiating (pinpointed as "*Sara describes what she wants, requests*

feedback, summarizes any discrepancy, suggests at least two alternative solutions and states a solution agreed to by both parties.") The condition under which the behavior is to occur is *"when a request is refused."* At other times, she is not expected to go through with all those steps.



disturbed might accept that lower level; once a client has been labeled in some negative way, people often assume he can't do as well as others (an untrue assumption). Would a supervisor consider "attending to task during 80% of the period" acceptable? Probably yes, so a criterion of 80% of the session would be appropriate. Sometimes a criterion is arbitrary: other times, it is determined by the level of behavior necessary for success at a more difficult or complicated task, or by the effects of the behavior on other people (some behaviors are often considered either absolutely necessary or completely intolerable).

Criteria may look like these:

"With 90% accuracy for two consecutive days"

"With no errors for one day"

"At least 15 times for two consecutive meals"

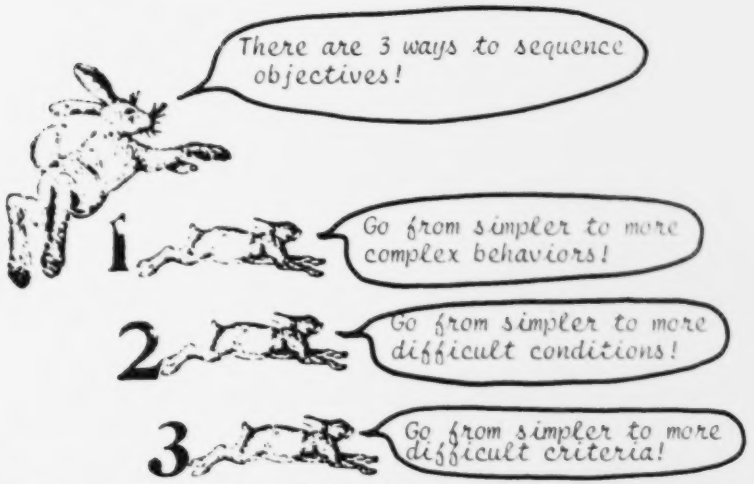
Criterion 8: *The criteria to which the behavior must be performed are stated:*

Once you establish what the behavior is and under what conditions it will occur, you need to establish how well it must be done for you to consider it successful. In other words, at what point will you consider the client to be ready for the next en route objective?

In other words the objective tells how much the behavior must change if the program is to be considered successful. If a client in a workshop attended to his work during 40% of the observed period, would his attending to task be considered acceptable? Probably not, although some supervisors who have already labelled a client *slow* or *emotionally*

Criterion 9: *The en route objectives are listed in a sequence which leads toward the long-range goal.*

Of course, the object of preparing en route objectives is to help your client reach his/her long-range goals. Most long-range goals (but not all) require more than one en route objective.

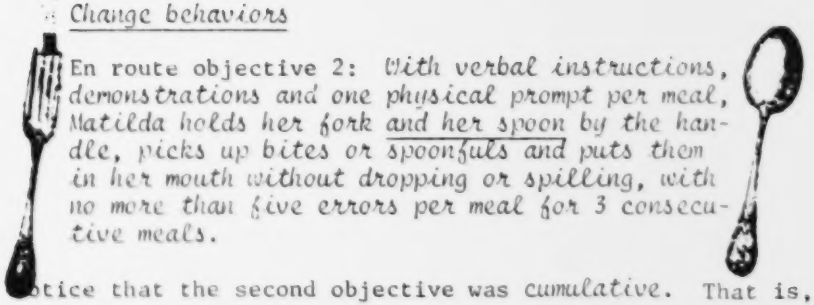

There are 3 ways to sequence objectives!
1
Go from simpler to more complex behaviors!
2
Go from simpler to more difficult conditions!
3
Go from simpler to more difficult criteria!

Using an example of Matilda's eating, here are some examples:

En route objective 1: *With verbal instructions, demonstrations and one physical prompt per meal, Matilda holds her fork by the handle, picks up bites of solid food and puts them in her mouth without dropping them with no more than five errors for 3 consecutive meals.*

Possible Sequences

1 *Change behaviors*



En route objective 2: *With verbal instructions, demonstrations and one physical prompt per meal, Matilda holds her fork and her spoon by the handle, picks up bites or spoonfuls and puts them in her mouth without dropping or spilling, with no more than five errors per meal for 3 consecutive meals.*

Notice that the second objective was cumulative. That is, when Matilda began to use her fork successfully, we did not drop it and work on using a spoon. We moved on to using a spoon and fork. Notice that we didn't have to write that she used only one utensil at a time. That is implied.

2 *Change conditions*

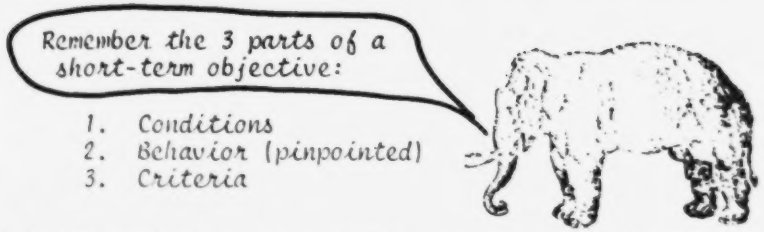
En route objective 2: *Without help, Matilda holds her fork by the handle, picks up bites of solid food and puts them in her mouth without dropping them, with no more than 5 errors per meal for 3 consecutive meals.*

3 *Change criteria*

En route objective 2: *With verbal instructions, demonstrations and one physical prompt per meal, Matilda holds her fork by the handle, picks up bites of solid food and puts them in her mouth without dropping them, with no more than 2 errors per meal for one week.*

How many en route objectives do you need to write for each long-range goal? That is hard to say. It depends on how big the change in behavior is, at what skill level the client is starting, how good you are at teaching the skill and how long you have to teach. In general, *if a client is having great difficulties reaching an en route objective, you need to break it down further.*

Each en route objective should be a small change which clearly shows progress from the previous en route objective.



All behavioral objectives should include the following three components:

1 *Behavior:* A description of expected terminal behavior goal which can be observed by at least two independent observers.

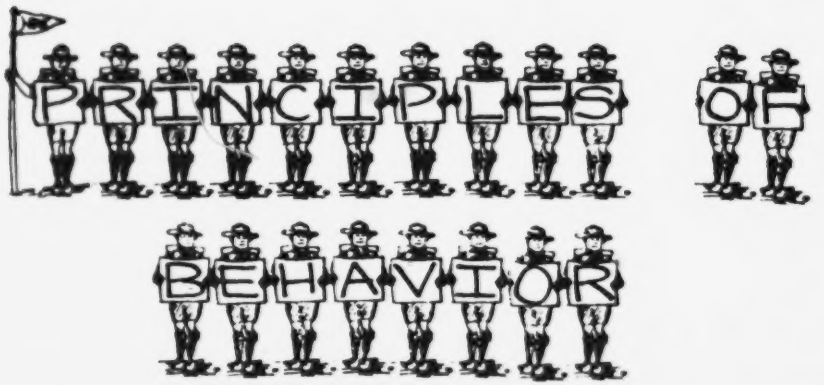
2 *Conditions:* A statement of the conditions under which the behavior is to occur.

3 *Example:* Given a baseball and glove, the student will throw the ball into the air and catch it seven times out of ten.

The ball should be thrown at least five feet into the air!

Conditions	*Behavior*	*Criteria*
Given a baseball and glove	The student will throw the ball in to the air and catch it.	When thrown in the air at least five feet, the ball will be caught seven times out of ten.

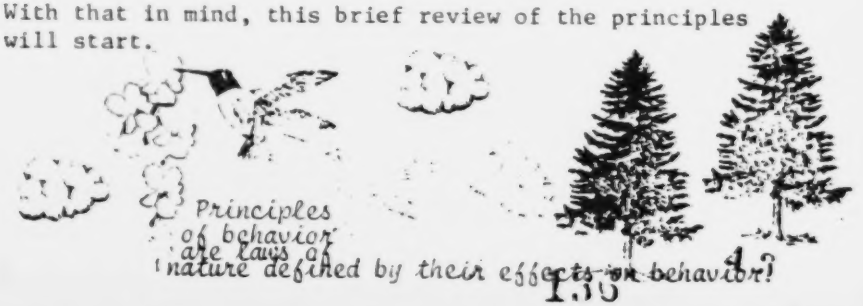
SEE SELF-TEST #2



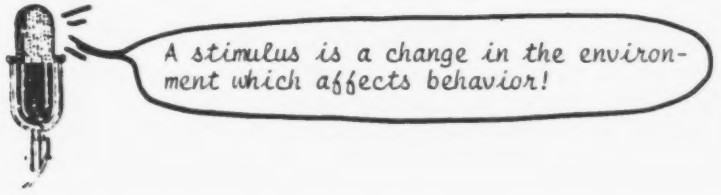
In this section, we will discuss some of the principles of behavior. For some students, this will be a review. For others, it will be new information. In any case, we will try to keep it simple. Only these principles and items will be covered: *reinforcer, reinforcement, punisher, punishment, stimulus discrimination, discriminative stimulus* and *extinction*. This section is meant only to give you a basic knowledge of some terms which will be used in later modules. It will not teach you how to use the principles. It will only help you to be able to recognize some of the words and to know an example of each when you see one.

These principles of behavior are well-documented. They affect our lives each day. Whether we like them or not, whether we understand the logic behind them or not makes no difference. Like gravity, they are laws of nature. But they are not simple. The world is complex and many things affect people's behavior. For that reason, we will emphasize over and over that these principles are defined *by their effects on behavior*. If you don't understand yet what that means, don't worry. You will soon.

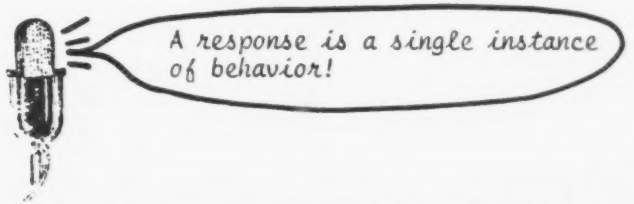
With that in mind, this brief review of the principles will start.



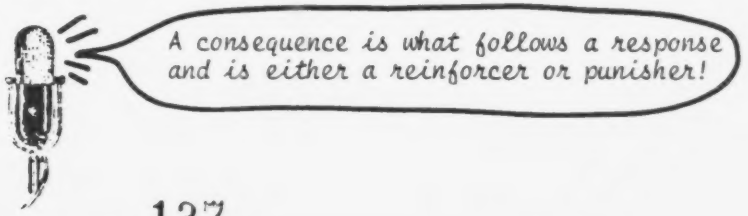
First, we need to divide events into *stimuli* and *responses*. A stimulus is *any change in the environment which affect the behavior of a person.* When light hits a person's eye, his pupil gets smaller; light, in this case, is a stimulus. If a loud noise startles someone, the noise is a stimulus. If the person is completely deaf and the loud noise does not startle her, it is *not* a stimulus for her. *If a change in the environment does not affect behavior for a person, it is not a stimulus for that person.*



A response is something a person does. *A single instance of a behavior is called a response.* A response is an observable change in behavior



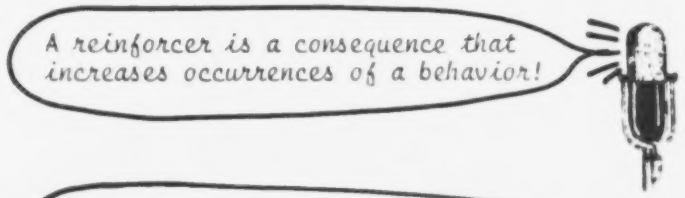
Consequent stimuli: *A consequence is something which comes after a response.* A consequent stimulus comes after the behavior it affects. How can a stimulus affect a behavior which has already happened? It doesn't, really. It makes it more or less likely that the behavior will happen *again*. There are two kinds of consequent stimuli: reinforcers and punishers.

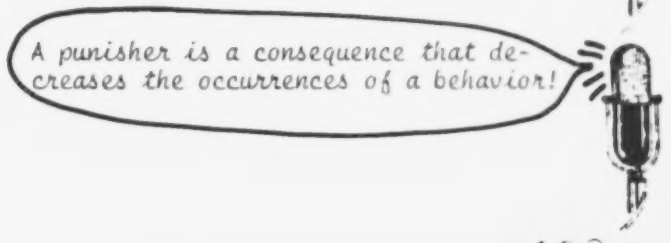


Reinforcers are consequences that increase the likelihood that a behavior will happen again. That is, they *make the behavior happen more often or at a greater strength or intensity.* They are usually events that we consider positive or rewarding. However, sometimes negative events such as criticism may serve as reinforcers for some people. The only way to tell if a consequence is a reinforcer is to see whether it increases the occurrences of the behavior it follows.

Punishers are consequences that decrease the likelihood that a response will occur again. *Punishers make responses that they have followed occur less often in the future.* Punishers are usually events that we would consider negative or annoying. That is not always true. Some of your clients, for example, may do more of a behavior if you often criticize them after they do it. Sometimes any attention, even criticism, is better than no attention at all. In that case, criticism may serve as a reinforcer (even though you intend it to be a punisher). In the same way, a client who prefers to be alone may decrease a behavior which you praise. In that case, praise would be a punisher.

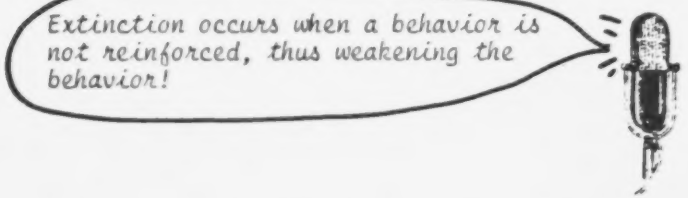
Since reinforcers and punishers are both consequences, there is only one way to tell whether a stimulus is a reinforcer or a punisher. Look carefully to see whether the behavior increases (showing that the stimulus is a reinforcer) or decreases (showing that the stimulus is a punisher). The very same stimulus may be a reinforcer for one client and a punisher for another. It may even be a reinforcer for a client at some times, but not at others (for example, snacks may not be reinforcing right after dinner).





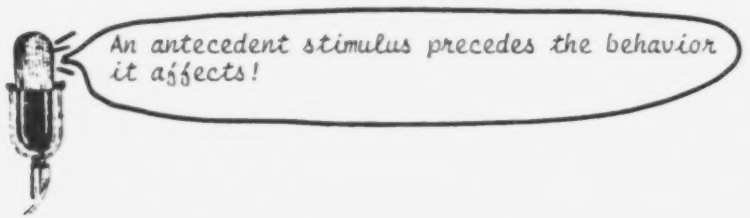
Extinction: *If a behavior which has been reinforced in the past is no longer reinforced, the behavior will weaken.* This process is called *extinction*. In extinction, the behavior does not usually disappear entirely but returns to about its rate before reinforcement began.

Extinction may also occur for punished behaviors. If they are no longer punished, they may begin to occur more often. Extinction does not mean ignoring the client. It means ignoring a specific behavior.

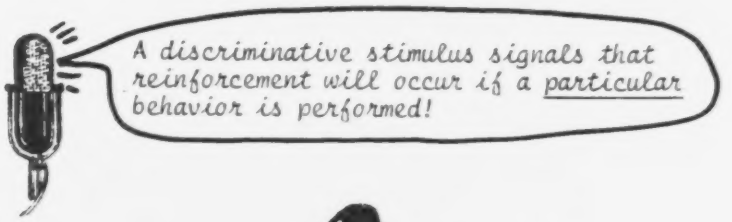


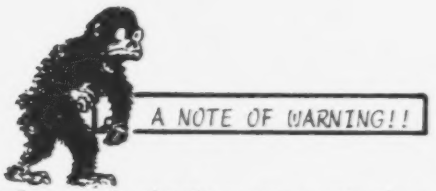
Antecedent stimuli: An antecedent is something which comes before a response. *An antecedent stimulus comes before the behavior it affects.* The above examples of the light and the loud noise are antecedent stimuli. An antecedent may affect behavior in one of two ways:

1. *It may cause a reflex behavior to occur.*
2. *It may signal when a behavior will be reinforced.*



Discrimination: If a behavior is reinforced in one situation (for example, the workshop) but is ignored in another situation (for example, home), it will increase only in the place where it is reinforced. This is called discrimination. After a while, *the person discriminates one stimulus from another.* When an antecedent stimulus signals that reinforcement will occur if the client performs a particular behavior, that stimulus is called a *discriminative stimulus.* In the presence of a discriminative stimulus, a response is reinforced (and occurs more often). In the absence of that discriminative stimulus, the response is not reinforced (and occurs less often). To use a simple example, we learn that green lights signal "GO" and red lights signal "DON'T GO."



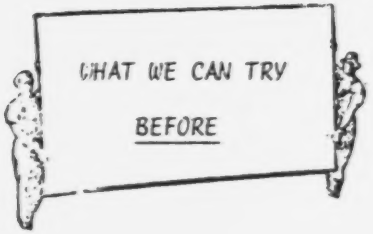


Remember, these principles work whether you want them to or not. You may accidentally reinforce (increase) a misbehavior that you really don't want. Other clients may reinforce or punish behaviors. Working with clients will be easier if you use the principles of behavior carefully.

Remember also that completing this module does not make you an expert on any of the techniques covered. The module was not intended to teach you how to write objectives or do task analyses or use behavior principles. It was only intended to clarify the philosophy behind the rest of the course and to assure that you understand, at least a little, some of the language which will be used in later modules.

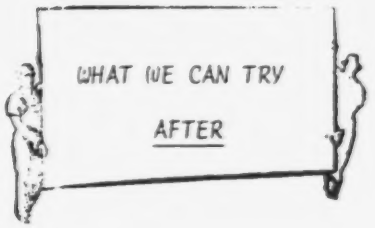
SEE SELF-TEST #3

OUR INFLUENCE ON OTHERS IS A FUNCTION OF:



A GOOD JOB!

Ask or request	Promise something
Demand	Plead with or beg
Give job to do	Encourage
Post notice	Remind or prompt
Set a goal	Threaten
Inform	Expect
Instruct	Model or demonstrate
Challenge	Guide

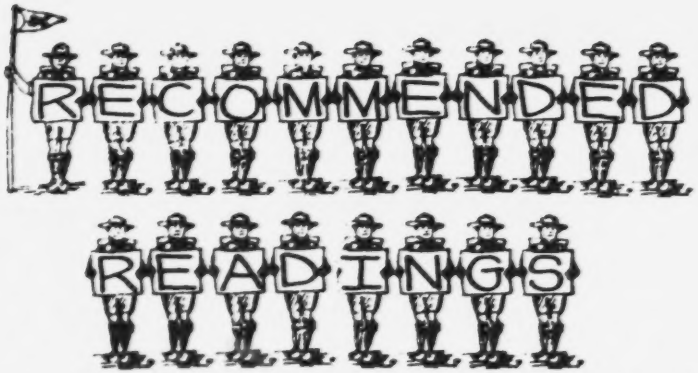


A GOOD JOB!

Thank	Pay
Compliment	Give bonus
Commend	Award
Praise	Show appreciation
Congratulate	Allow or admit
Pat on the back	Get off their back
Pay attention to	Recognize

A POOR JOB!

Punish	Fire
Ridicule	Model or demonstrate
Give cold shoulder	Guide
Dock their pay	Instruct
Ignore	



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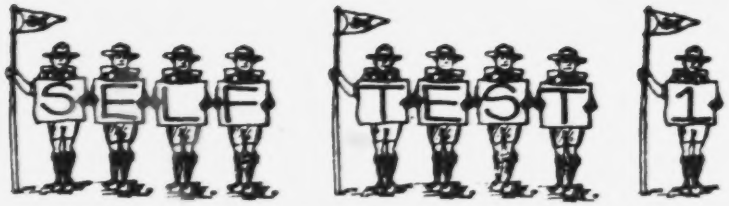
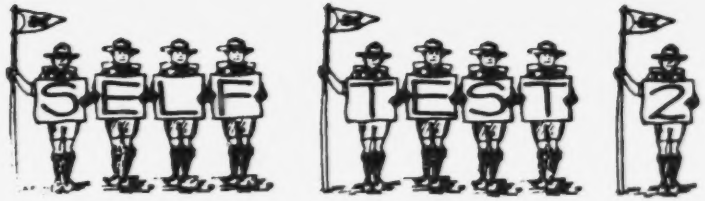


1 Give two reasons why it is important to measure behavior.

2 What are two reasons for the use of task analysis?

3 What are two reasons for taking baseline data before starting instruction?

4 List the steps in systematic instruction.



For each of the following objectives, mark whether it has *conditions*, a clearly *pinpointed behavior*, and *criteria*:

1 Manuel washes his hands after going to the bathroom.

	Yes	No
Conditions		
Behavior		
Criteria		

2 Manual washes his hands completely covering them with lather and rinsing them off, after going to the bathroom.

	Yes	No
Conditions		
Behavior		
Criteria		

3 Manuel washes his hands, completely covering them with lather and rinsing them off, after going to the bathroom, each time for 1 week.

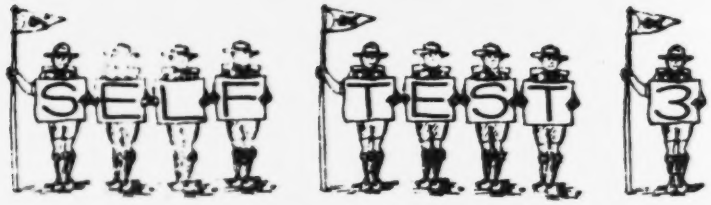
	Yes	No
Conditions		
Behavior		
Criteria		

4 Manuel shows a clear understanding of the need for personal hygiene and cleanliness following urination and defecation.

	Yes	No
Conditions		
Behavior		
Criteria		

5 Bertine assembles at least 50 widgets per day for 5 consecutive workdays with at least 98% meeting contract tolerance

	Yes	No
Conditions		
Behavior		
Criteria		



For each of the following situations, circle whether the stimulus (underlined) is a reinforcer, punisher or neutral stimulus. Then look at the answer and explanation before going on.

1 Tad spends most of his time looking around, playing with his fingers or non-work objects and making strange noises. He rarely attends to his work of packaging golf tees. His floor supervisor, Rona, checks him periodically. She tells him that he is to fill all the compartments in an egg carton with packages of golf tees, one to a compartment. When he has done so, she allows him to sit in an easy chair for five minutes. His rate of packaging tees goes from 12 packages/hour to 41 packages/hour

REINFORCER PUNISHER NEUTRAL DON'T KNOW

Answer: This was a consequence that increased the behavior, so it was a reinforcer.

2 Although Tad is working harder, he is still making strange noises. Now following each noise, Rona removes one package of tees from the egg carton. His rate of making noises decreases from 0.5/min to 0.1/min.

REINFORCER PUNISHER NEUTRAL DON'T KNOW

Answer; This was a consequence that decreased the behavior, so it was a punisher.

3 While Rona is off work because of illness, John supervises her area. Whenever Tad makes a strange noise, John tells him to be quiet. His rate of making noises is up to 0.4/min by the end of the day.

REINFORCER PUNISHER NEUTRAL DON'T KNOW

Answer: This consequence increased the behavior, so it was a reinforcer.

4 Jolene usually looks sloppy. She rarely combs her hair. One morning she arrives at work dressed in clean clothes and with her hair combed. Rona and John both tell her that she looks nice. Rona says, "Your hair really looks great. I love it. Keep combing it that way."

REINFORCER PUNISHER NEUTRAL DON'T KNOW

Answer: The correct answer is "don't know." The situation does not tell what happened to the behavior of combing hair.

5 In the above situation, Jolene came to work the next few days looking sloppy. Finally, one day she came with combed hair again. She was praised again. The next few days she looked sloppy. When she combed her hair, she was praised. It didn't seem to matter.

REINFORCER PUNISHER NEUTRAL DON'T KNOW

Answer: The praise did not affect the behavior. It is a neutral consequence.

For each of the following situations, circle whether the stimulus (underlined) is a discriminative stimulus or not.

6 Mel is being taught to dress and undress himself. He is to do so in the bathroom. The teaching procedure is working. Mel can now undress himself with little help. Unfortunately, he does so in the living room, front yard, and workshop.

YES NO

Answer: The bathroom is not serving as a discriminative stimulus. The program should be revised in some way so that it will.

7 When Frank is told to do something, he sometimes begins to bite himself and shake his fist. Most of the staff ignore him when he does so, as he does not bite hard enough to break his skin. John, however, lectures him about how he might hurt himself. When John is around, he bites himself often. When John is not around, he rarely bites himself.

YES NO

Answer: John is serving as a discriminative stimulus. He is the only staff member who reinforces this behavior with attention, so his presence signals Frank to bite.

8 Tad, the man who is packaging golf tees, works very hard when he has to fill an egg compartment with packages in order to earn a break. He is assigned to a different job, packaging rubber bands. His work rate decreases at first.

YES NO

Answer: Even though the egg carton is still there and the break consequence is still available, Tad has slowed down. Apparently, the golf tees served as a discriminative stimulus. At least some retraining will be required in order to assure that the egg carton, rather than the task, becomes a discriminative stimulus.

HUMAN SERVICES PROGRAM

ELLSWORTH COMMUNITY COLLEGE

REHABILITATION ASSOCIATE
TRAINING FOR EMPLOYED STAFF

Instructional Activities Manual

PRINTED AND DISTRIBUTED BY:
MATERIALS DEVELOPMENT CENTER

Stout Vocational Rehabilitation Institute
University of Wisconsin-Stout • Menomonie, WI 54751

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The Materials Development Center is partially funded by the REHABILITATION SERVICES ADMINISTRATION, U.S. DEPARTMENT OF EDUCATION, Washington, D.C.

INSTRUCTIONAL ACTIVITIES

The instructional activities that follow may be used as they stand, may be adapted for special groups or instructors' styles, or may simply provide ideas upon which an instructor can base learning activities. Please note a few characteristics of these activities:

1. There are a variety of instructional modes--lectures, discussions, games, practice sessions, role-plays, and application exercises. Some modules lend themselves to one mode or another.
2. Instructors may take advantage of the variety of modes by varying learning activities. Even a steady diet of games and role-plays can become boring.
3. Often, two or more alternative activities will be recommended. This allows instructors to vary modes or to provide additional learning activities for trainees who need extra help. Instructors may, if necessary, use all the alternatives to reach a particular objective.
4. Some instructional delivery systems may work better with certain modes of instruction. For example, audiovisuals (such as films) are difficult to use when teaching by telephone conferencing. Games, however, may promote both competition and cooperation among the stations (which are otherwise isolated by not being in the same location).
5. Self-tests may be checked by the trainer in tutorial situations. In the other delivery systems, self-tests may replace other activities. Discussion of self-tests as an activity is not usually listed in the IAPs, but it is often an excellent exercise.

The next section begins with descriptions of a few of the standard activities that are found in several modules. These standard activities are referred to in the IAPs. Following the standard activities are the IAPs themselves.

Standard Activities

Standard Activity: Open Discussion. Open discussions (recitations) are intended to assure that all trainees have learned the basic information covered in a module. Be sure that all trainees participate. A common sequence for the discussion could be the following:

1. Lecture briefly over the module, giving personal examples or experiences which relate to the main topics. Lecture should cover a maximum of 10 minutes.
2. Ask whether anyone has questions. If someone has a question, call on another trainee to answer.
3. Using the items listed under this activity in the IAP or the objectives listed in the text, ask trainees questions. Do not follow a predictable routine when calling on trainees. Occasionally, call on a trainee twice in a row. Praise correct answers and expand on them

if necessary. If a trainee makes an error or does not respond, call on another trainee; then go back to the trainee who was unable to answer and repeat the question.
Note: First ask the question, then call on a trainee. This keeps trainees from "tuning out."

4. Summarize the major points covered and ask for questions.

Standard Activity: The Objective Game. This game usually serves as an alternative to the open discussion and serves the same purpose. The group is separated into small groups (2-4 trainees).

1. Divide into groups. If training involves staff from more than one facility, assign trainees from different facilities to each group. This promotes sharing of knowledge and informal discussion; it also prevents destructive competition between facilities.
2. Tell all groups to prepare 3 or 4 questions based on the objectives. Give them 5 minutes to do so.
3. Rotating among groups, have each group ask one question and choose another group to answer (or allow the first group with an answer to give it).
4. Score the answer as follows:

   Complete, accurate answer = 3 points
   Nearly accurate or nearly complete answer = 2 points
   Partially correct answer = 1 point
   Incorrect or no answer = 0 points

5. For answers less than 3 points, another team can complete or correct the answer for the remaining points.
6. If no team completes the answer or there is a dispute, the team which asked the question must complete or correct the answer. The instructor acts as arbiter and awards the points if necessary. Keep it friendly. Give the benefit of the doubt.

The Objective Game may be adapted for use in practice activities.

Standard Activity: Fault-Finding Game. Teams set up situations in which there are flaws involving treatment programs, ethical considerations, philosophy (e.g., normalization), specification of objectives, or legality of placement or program. The other teams seek out the flaws.

This activity not only makes people sensitive to subtle issues, it also makes them aware of the difficulties in their own programs. It is common for teams to design faults that occur in their own facilities. In this game, designing the faults is every bit as enlightening as finding them.

1. Divide into teams of 3 or 4 persons.
2. Assign a topic for the situation.
3. Tell teams that there should be one or two faults relevant to the current module or one covered earlier in the training.
4. After situations have been written, have the first group describe its situation. All teams try to find the faults (alternatively, you may rotate so that team 2 finds faults in the team 1 situation, team 3 finds faults in the team 2 situation, etc.). When describing a fault, a team must also give a possible solution.
5. When one team has finished and all faults have been found, rotate to the next team.
6. Score as follows:

   Fault + solution = 3 points
   Fault + partial solution = 2 points
   Fault = 1 point
   A team which has designed a clear fault which is not detected may earn points by describing the fault and a solution.

Standard Activity: Modeling. Models and demonstrations may be clearer than descriptions. There are two effects of modeling:

1. Observational learning--trainees may learn new skills by observing models.
2. Disinhibition/facilitation--seeing a model perform a behavior may make a trainee more comfortable and less resistant to practice. An instructor may specifically demonstrate both poor and good examples. This not only improves trainees' abilities to discriminate when techniques are used correctly and incorrectly, but it may also improve willingness to practice and reduce fear of making errors.

There are several characteristics of modeling which may enhance its effectiveness:

1. Greater imitation will occur if the model a) is an expert or person of high status, b) is similar in some way to the trainee (as, for example, a well-liked co-worker), or c) controls rewards for the trainee.
2. Imitation is increased if the trainees see another trainee rewarded for following the demonstration. On the other hand, the model will be less effective if trainees see another trainee criticized for inaccurate imitation. Thus, try to find something to praise in every attempt to follow a model.
3. The instructor should a) gain the attention of the trainees before modeling, b) tell trainees what specific points to look for, c) model those points directly without unnecessary irrelevant details, d) ask the trainees to point out how the model demonstrated the points to be learned, e) ask a trainee to model the same skill in the same or a similar situation, and f) praise the trainee for performing the modeled behaviors.

4. Modeling should be followed by role-played practice by all trainees or by actual on-the-job practice.

Standard Activity: Role-play. Many of the techniques taught in the modules may be simulated in role-plays or may be rehearsed. In some role-plays, trainees pretend to be involved in a situation which might arise.

Role-plays can serve several purposes. They may serve as skill practice, as a way to apply knowledge in decision-making situations, or as a way to develop sensitivity to other persons and to ethical and philosophical issues.

Role-plays for skill practice may follow modeling. The following recommendations may be helpful:

1. Describe very clearly what you want the participants to practice. For example, say "Jim, you will teach Ann how to cut glass. Use the task analysis to do a whole-task presentation. Ann, make a few errors and get a few steps right."
2. Start by practicing only parts of tasks; in the above example, Jim and Ann might be asked to role-play only one step in the task analysis. Then, another pair could be asked to role-play that step and one more. Finally, another pair could role-play the entire task.
3. Ask the rest of the trainees to evaluate each role-play according to the criteria established in the module (using performance evaluation check sheets if appropriate). If the role-player "gets stuck," ask another trainee to suggest what should be done next.
4. Provide feedback to the trainee following role-play. Point out what the trainee did right. Ignore minor errors. If you must point out an error, describe or demonstrate how to correct it and ask the trainee to practice that part of the situation again.

Role-plays for decision making may give trainees an opportunity to experience problem-solving processes. Trainees apply knowledge or philosophy to hypothetical situations. They may be assigned to play a particular role (such as parent or case manager) or may be themselves. This type of role-play is somewhat less structured than a role-play for practice, but the same recommendations apply.

One procedure which promotes communication among staff is to "rotate problems." Group 1 sets up a problem (from a real work situation, if possible) for Group 2 to discuss, Group 2 sets up a problem for Group 3, and so on. Solutions are then reviewed by the whole group.

There are a number of ways to use role-playing to promote sensitivity or attitude change. Role-reversal involves taking on the role of another person with whom the trainee might work. The trainee might be assigned to be a client, parent, or therapist.

Structured role discussions are role-plays in which trainees are assigned roles and attitudes to display during a discussion. After the discussion, trainees are "debriefed." They read their "attitude descriptions" aloud. Then

group members explain their feelings about the discussion and about the individuals as they played their roles.

In a debate, trainees are assigned to advocate for a position. The topic is presented by the instructor. Debate teams are established in one of the following two ways:

1. A panel of 3-4 trainees per team present the pros and cons of an issue. After the debate, the audience of trainees vote and give their feelings about the issue.
2. Trainees are divided into groups of 2, 4, or 6. They debate in these small groups.

Here is a common sequence for a debate:

1. Announce the topic.
2. Divide into teams.
3. Allow 5 minutes for preparation.
4. Debate for 10 minutes.
5. Allow audience voting and participation, or tell debaters they must now switch sides and argue for the other side.

TASK 1: OBJECTIVE GAME
Purpose: Cover all objectives
Duration: 30 minutes
Materials needed: Module text (one per student)
Instructions: See p. 2

Assure that the following items are covered:

Steps	Reasons for IPP
Reasons for task analysis	Reasons for measuring behavior
Reasons for baseline	Criteria for goals and objectives
Reinforcer	Reinforcement
Punisher	Punishment
Discriminative Stimulus	Extinction

TASK 1 ALTERNATIVE: OPEN DISCUSSION
Purpose: Cover all objectives
Duration: 30 minutes
Materials needed: Module text
Instructions: See p. 1

Cover items in Task 1. Remember that this is an overview. Do not attempt to get full understanding of each topic.

TASK 2: PRACTICE ON SHORT-TERM OBJECTIVES
Purpose: Objective 3
Duration: 40 minutes
Materials needed: Module text (one per trainee)
One list of objectives per student (either from sample or from actual work setting IPPs)
Instructions:

1. Pass out lists of objectives.
2. Instruct trainees to identify those objectives which are correctly written and those which are incorrect. Next to each incorrectly written objective, trainees should note which criterion was violated.
3. After trainees have had time to check the first three objectives, discuss those three. Then have trainees complete the list.
4. Discuss the rest of the objectives.
5. Ask trainees to correct each incorrectly written objective.
6. Discuss the corrections.

Sample:
Following is a list of sample objectives, both correct and incorrect. Correctly written objectives are marked "C"; incorrectly written objectives are marked with the number of the criterion which was violated (see text).

1. Mike will know how to bathe. 1,2,4,6,7,8
2. Henry will dress himself without help. 4,8
3. Mac will ride a bicycle around the block without assistance and without stopping. C

4. Chuck will punch the time clock at work on time each day for two weeks. C
5. Susie will learn how to type 60 words per minute. 6
6. Debbie will take an entire roll of pictures without covering any with her finger. C
7. Mary will be taught to dress herself, with all clothes matching, no dirt or holes in any clothes, shoes tied, all buttons, snaps or zippers fastened, and all clothes tucked in if appropriate, with no help for three consecutive work days. 3
8. John will pay attention to what his work foreman says. 4,7,8
9. Carl assembles at least 12 correct drapery pullers per hour for three consecutive days. C
10. Olive will fully understand the consequences of sexual intercourse following counseling. 1,2,4,7,8 (Note: The statement "following counseling" does not describe the conditions under which the goal behavior will occur. Instead, it describes a program for reaching the goal.)
11. Ted will not burp, belch, or make animal noises. 5,8

TASK 3: FILM
Purpose: Objective 7, Behavior Principles
Duration: 60 minutes
Materials needed: Film "Who Did What To Whom?" Available from Research Press.
Instructions:

This film shows brief vignettes which illustrate behavior principles. Using the booklet which accompanies the film, show vignettes, and discuss them.

TASK 3 ALTERNATIVE: DISCUSSION OF BEHAVIOR PRINCIPLES
Purpose: Objective 7, Behavior Principles
Duration: 30 minutes
Materials needed: none
Instructions:

Ask trainees to present one example from their work or everyday life which illustrates each of the principles covered in the text. For each, discuss whether it accurately reflects the principle, how knowing the principle can affect how trainees will respond to the example, and whether other principles also apply to the example.

Test Form A-Key

1. List the steps in Systematic Instruction.

1. a. Assess skills
   b. Use IPP process to determine goals and objectives (either "IPP" or "set goals" is O.K.)
   c. Task analyze if appropriate
   d. Choose behavior measure
   e. Baseline (or, measure behavior)
   f. Assess environment in which behavior is to be used
   g. Establish instructional procedure
   h. Implement procedure and assess effect
   i. Modify plan if necessary
   j. Establish maintenance or generalization program
   k. Communicate results

2. What is the role of the IPP in Systematic Instruction?

2. It is the map - it sets the direction of programs.

3. For each of the following short-term objectives for clients, circle C if it is correctly written and circle I if it is incorrectly written.

   a. C I Morton will feel better about himself and accept his handicap.
   b. C I Gladys develops more independent living skills.
   c. C I Hamilton will brush his teeth correctly without help each day for a week.
   d. C I After a week of instruction, Ned will be able to control himself whenever he is angry or frustrated.
   e. C I Joan completes her assigned work at 50% of industry standard for two consecutive weeks.
   f. C I Andrew will go to his work station and begin his task within one minute after starting time and the end of break, with no prompts for one week.
   g. C I The counselor will help Naomi to express her feelings, by being supportive, being available to Naomi whenever she needs help, and by reflecting back Naomi's feelings.
   h. C I Frank will understand the necessity of being on time for work.
   i. C I John sorts nuts and bolts with 98% accuracy for 3 consecutive days.
   j. C I In a one-to-one tutoring session, given a sanitary napkin, Dora understands how to use it with 100% accuracy.

4. Give two reasons why it is important to gather data when implementing a Systematic Instruction program.

4. a. Helps in making decisions
   b. Accountability
   c. Communication
   d. Required by accreditation standards

5. Why is it especially important to take baseline data before beginning a Systematic Instruction program? Give at least one reason.

5. a. Determine whether behavior really is a problem
   b. Only way to find out whether program works
   c. May show you where to start in a program

Test Form A-Key (Con't.)

6. List two reasons for the use of Task Analysis.

6. a. Makes teaching easier
   b. Provides an evaluation system
   c. Allows individualization
   d. Allows consistent training

7. For each of the following situations, circle the behavior principle being illustrated.

   a. John has been assembling an average of 6 levers per hour. The floor supervisor decides to let him take a break whenever he has completed 6 levers. After one week of this, John assembles an average of 11 levers per hour.
      a. discriminative stimulus
      b. reinforcement
      c. punishment
      d. None of the above

   b. John has been assembling an average of 6 levers per hour. The floor supervisor notices that he sometimes seems to daydream. Whenever she sees him daydream, she tells him to get back to work. She sometimes has to physically move him to get him started. After a week of this, he averages 4 levers per hour and seems to be daydreaming more and more.
      a. punishment
      b. extinction
      c. reinforcement
      d. none of the above

   c. Lennie comes to the workshop dirty. He does not wash his face or hands, and he usually smells. The Independent Living Coordinator sets up a contract with Lennie in which he can earn $1 each day he comes with a clean face and hands and no body odor.
      a. extinction
      b. discriminative stimulus
      c. reinforcement
      d. none of the above

   d. Hortense frequently leaves work to rush to the nearest adult (usually the work supervisor) and hug or touch that person. The work supervisor feels that she is seeking attention and affection. However, the behavior is unacceptable. The staff ignore her hugging by continuing whatever they were doing. At the same time, they seek her out during break time and talk to her. She begins to try hugging them more and more, but after a few days, her hugging begins to decrease.
      a. extinction
      b. discriminative stimulus
      c. punishment
      d. none of the above

   e. Mac is packaging golf tees. When Dwight is supervising him, he averages 42 packages per hour. Dwight frequently checks his work and tells him when he has worked quickly and accurately. Sometimes, however, Dwight is involved in another area of the workshop. At those times, Ann has to supervise the tee packaging and wood working areas. She has little time to check tees. At those times, Mac averages 15 packages per hour.
      a. punishment
      b. discriminative stimulus
      c. reinforcement
      d. none of the above

Test Form B-Key

1. List the steps in Systematic Instruction.

1. a. Assess skills
   b. Use IPP process to determine goals and objectives (either "IPP" or "set goals" is O.K.)
   c. Task analyze if appropriate
   d. Choose behavior measure
   e. Baseline (or, measure behavior)
   f. Assess environment in which behavior is to be used
   g. Establish instructional procedure
   h. Implement procedure and assess effect
   i. Modify plan if necessary
   j. Establish maintenance or generalization program
   k. Communicate results

2. What is the role of the IPP in Systematic Instruction?

2. It is the map--it sets the direction of programs

3. For each of the following short-term objectives for client, circle C if it is correctly written and circle I if it is incorrectly written.

3. a. C I Orville will assemble drapery rods with all parts in the correct positions at a rate of 10 rods per hour with 95% accuracy.
   b. C I Wendy will behave appropriately during breaks and lunch hours.
   c. C I Given stressful situations involving interpersonal interactions with potential employers, Doris will demonstrate a clear understanding of the employer-employee relationship without inappropriate emotional behavior. She will do so each time for one week.
   d. C I Ted will punch the time clock at, or within 5 minutes before, his 9:00 work time, each day for one week.
   e. C I In a simulated job interview situation, Rosette will demonstrate correctly:
      Greeting the interviewer
      Answering questions with all necessary information
      Looking at interviewer 40-75% of interview time
      Making at least one statement of confidence
      Asking at least one job-related statement
      Thanking the interviewer
      She will do so for two consecutive simulated interviews.
   f. C I Ann will count nickels up to $1 without error for 10 consecutive trials.
   g. C I Given individual counseling with the counselor for six weeks, Alan's self-esteem will greatly increase.
   h. C I Hugh will show good personal hygiene every day.
   i. C I Given a magnet with color coding and two color coded boxes, Tim will separate magnetic from nonmagnetic wires and put them in the correct boxes with 100% accuracy for three consecutive days.
   j. C I Supervisory staff will praise Ellis each time he makes his bed for five consecutive days.

4. Give two reasons why it is important to gather data when implementing a Systematic Instruction program.

4. a. Helps in making decision
   b. Accountability
   c. Communication
   d. Required by accreditation standards

5. Why is it especially important to take baseline data before beginning a Systematic Instruction program? Give at least one reason.

5. a. Determine whether behavior really is a problem
   b. Only way to find out whether program works
   c. May show you where to start in a program

6. List two reasons for the use of Task Analysis.

6. a. Makes teaching easier
   b. Provides an evaluation system
   c. Allows individualization
   d. Allows consistent training

7. For each of the following situations, circle the behavior principle being illustrated:

7. a. Don occasionally throws temper tantrums which consist of waving his arms wildly and yelling, "No, No, No" over and over. When he does this he is taken to the counselor, who has him spend several minutes sitting by himself to calm down. After he is calm, the counselor talks to him. The counselor goes on vacation and Don throws a tantrum. Staff do not know where to send him, so they make him stay at his station. After two hours of yelling, he quiets down and starts working. He does this two more times and he does not throw a tantrum the rest of the week.
   a. punishment
   b. extinction
   c. reinforcement
   d. none of the above

   b. Fran picks up items around the workshop and puts them in her mouth. Any time a floor supervisor sees her do this, s/he firmly says "No, Fran! Take it out!" If Fran resists, she is removed from the work area and required to wash out her mouth several times with a mouthwash that does not taste good. Her rate of mouthing objects has decreased from an average of 12.8/hour to an average of 1.2/hour.
   a. punishment
   b. extinction
   c. discriminative stimulus
   d. none of the above

   c. Erwin is being taught to count money. Every time he counts the correct change, he is praised and given a penny.
   a. reinforcement
   b. extinction
   c. discriminative stimulus
   d. none of the above

   d. Annie is being taught how to separate magentic wires from nonmagnetic wires. She uses a magnet to determine which wires are magnetic. She is supposed to put the magnetic wires in one box and the nonmagnetic wires in another. She has been working at about 70% accuracy. The floor supervisor puts an orange dot on the magnet and on one box. She

7. d. puts a blue line on the table and on the other box. She shows Annie how to put the wire on the blue line and attempt to pick it up with the magnet. If it sticks to the orange (magnet), it goes in the orange box. If it stays on the blue (table), it goes in the blue box. Using colors, Annie separates wires with 95% accuracy.
   a. punishment
   b. reinforcement
   c. discriminative stimulus
   d. none of the above

   e. Fred gobbles his food as fast as he can. From the time he gets his plate, he eats as quickly as possible. He hardly chews his food and he never talks to anyone during the meal. As soon as he finishes, he holds up his plate for seconds or attempts to take food from someone else's plate. The staff decide to give him very small portions and to require him to say at least one sentence of conversation before he can get his next portion or to wait at least one minute following the time he finishes a portion. Now he eats each portion quickly and talks briefly. He is saying at least 10 sentences of conversation each meal.
   a. punishment
   b. reinforcement
   c. extinction
   d. none of the above

APPENDICES

APPENDIX A: IOWA NEEDS SURVEY

PLEASE COMPLETE AND RETURN WITH OTHER SURVEYS, IN ENVELOPE PROVIDED, BY SEPTEMBER 20.

Needs Assessment

The Iowa Association of Rehabilitation Facilities (IARF),* the Iowa Association of Private Residential Facilities for the Mentally Retarded (IAPRFMR),* and the Iowa University Affiliated Facility (IUAF) at the University of Iowa have collaborated in developing and jointly issuing the following needs assessment. This has allowed us to consolidate our efforts and cut down on the number of surveys that facilities, already inundated with information requests, would receive. This one instrument will serve the following purposes:

IARF will use the results to update its training needs information and to develop a coordinated package of training programs to agencies offering vocational services.

IAPRFMR will use the results for identifying specific training needs of their member agencies, especially in the areas of staff development and human potential training.

The IUAF will use information from the survey results for the preliminary planning of a statewide Training Resources Clearinghouse. The goal of the Clearinghouse is to help Iowa's service providers meet the in-service training needs of their staffs by acting as a "broker" of information about available training resources. These resources include both effective trainers with special expertise in particular areas and training materials packages (many of which will be available on a free loan basis from the Clearinghouse's library).

We appreciate and thank you for your assistance in this joint effort.

Directions:

Each of the 5 surveys should be filled out by the person in your agency best described by each of the following staff positions (at the top of each survey appears the title of the staff person who would fill out that particular survey corresponding to the description below)--

Administrator:

The individual responsible for overseeing the day-to-day administration of the entire operation of the agency, who usually holds the title of "executive director" or "chief executive officer."

---

*IARF and IAPRFMR have consolidated and are known as the Iowa Association of Rehabilitation and Residential Facilities.

Program Supervisor:

An individual charged with the responsibility of running a particular program, or programs within the agency, such as a "vocational director" or a "supervisor of residential services." A program supervisor could also be a professional on the agency's staff charged with providing a specialized service within a disciplinary area, such as physical therapy, occupational therapy, nursing, psychology, etc.

Case Manager:

An individual designated as the person responsible for coordinating an individual's program plan. This could be a social worker on the agency's staff, or someone who is referred to as the "program coordinator."

Direct Care (Contact) Worker or Trainer

A person working most closely with individuals served by the facility. This would include group home workers, cottage staff, line supervisors in vocational programs, and other direct care or contact workers.

Other personnel:

This category would cover anyone not otherwise described by the preceding job titles. Staff in this category might include maintenance staff, housekeepers, food preparation staff and secretarial personnel.

Individuals completing each of the 5 surveys should respond to all items within the survey, even if the subject matter doesn't pertain directly to his or her job duties.

To complete the survey, write one of the numbers (listed in the rating scale below) in the space before each survey item that best represents your agency's need for training in that area.

---

1 = "information we need"
2 = "would be nice, but is not essential"
3 = "no need"
4 = "not applicable to our agency"

Please complete the survey and return it to us in the envelope provided by September 20, 1982. Thanks.

NOTE: ALL ITEMS ARE TO BE RATED, REGARDLESS OF THE POSITION OF THE PERSON COMPLETING THE SURVEY.

I. Individual Program Planning

____Organizing the interdisciplinary team

____Behavior modification principles

_____Interdisciplinary team process

_____Cooperative staffings with other agencies

_____Current assessment instruments

_____Modifying assessment instruments

_____Method for training clients

_____Program coordinator

_____Application of behavior modification principles

_____Efficient data collection record keeping methods

_____Case management systems

_____Involving parents

_____Involving clients

Comments: _____

_____

_____

II. Advocacy, Rights, and Human Dignity Issues

_____Orientation to self-advocacy

_____Orientation to advocacy

_____Organizing an agency human rights committee

_____Organizing an agency behavior management committee

_____Identifying age-appropriate materials

_____Issues in sex education

_____Client rights

_____Confidentiality of client records

_____How to apply the principles of normalization

_____Guardianship and other protective services

Comments: _____

_____

_____

III. Developmental Disabilities

_____Developmental disabilities general information

_____Developmental disabilities health information

Comments: _____

_____

_____

IV. Accreditation

_____Introduction to voluntary accreditation

_____Iowa DSS regulations pertaining to accreditation

_____AC/MRDD accreditation

_____CARF accreditation

Comments: _____

_____

_____

V. Training for Administrators

_____Managing group homes

_____Managing semi-independent/ individual apartment programs

_____Organizing an agency volunteer program

_____Overview of the service delivery system in Iowa

_____ICF/MR funding for community programs

_____Special education funds

_____Social Security benefits for clients

_____S.F. 572 funds

_____Social Services Block Grant

_____Role of count in human service funding

_____Supervisory training

_____"Coaching" (for improved staff performance) supervisory methods

_____Effective interviewing skills

_____Solving employee dissatisfaction

_____Improving communication

_____Management problem solving techniques

_____How to run meetings

_____Personnel record

_____Fiscal management

_____Wage and salary administration

_____Appraising performance

_____Development and implementation of training programs

_____Developing personnel policies

_____Working with the board of directors

_____Insurance programs

_____Affirmative action

_____Marketing methods

_____Contract bidding

_____D.O.L. compliance

_____Pricing

_____Cost estimating

_____Writing job descriptions and setting performance standards

_____Assessing managerial effectiveness

_____Time management techniques

Comments: _____

_____

_____

VI. Training for program supervisors, case managers, direct contact staff, and support staff

_____Self-esteem training for clients

_____Management of aggressive individuals

_____CPR Training

_____How to teach daily living skills

_____Overview of commonly used medications

_____How to shape social behavior

_____How to teach self-help skills

_____How to teach recreation skills

_____How to teach communication skills

_____Procedures for increased oral hygiene

_____Issues in nutrition

_____Use of modified diets

_____Food preparation procedures

_____Safety procedures

_____Filing and record keeping

_____Telephone techniques

_____How to prepare clients for job interviews

_____Other job-seeking skills

_____Vocational production design

_____Time studies (vocational)

_____Marketing

_____Basic health maintenance for clients

Comments: _____

_____

_____

VII. Human Potential Training

_____Stress Management

_____"Adventures in Attitudes"

_____"Lifepower"

_____Self-esteem training programs staff

_____Transactional analysis for staff

Comments: _____

_____

_____

Desired Training Sites: Rank the following training sites according to your preference. Place a "1" on the blank preceding the training site you would most prefer, a "2" by your second preference, and so on until you have ranked all items listed below:

_____training at your facility

_____training provided at nearby facility (within 75 miles)

_____training provided at community colleges in your area

_____training provided at University of Iowa, Iowa City

_____training provided at Iowa State University, Ames

_____training provided in Des Moines

_____other: _____

_____

Desired Training Formats: Rank all the following formats as you did the training sites above. Again, rank the statements according to your preference for most of the training you desire:

_____workshop (short lectures, problem-solving activities)

_____seminar (lecture, information dissemination)

_____self-instructional materials

_____reference books and manuals

_____other: _____

_____

Check the types of equipment you have access to for use with media software (films, tapes, etc.):

_____35mm slide projector

_____slide/tape deck

_____audio cassette

_____color monitor (for videotape)

_____black & white monitor (for videotape)

_____16mm projector

_____overhead projector

_____opaque projector

_____1/2" Beta #2 format video cassette playback

_____3/4" U-matic video cassette playback

_____1/2" VHS format video cassette playback

_____1/2" Beta #1 format cassette playback

_____1/2" Beta #3 format video cassette playback

Other: _____

What one person is responsible for training at your facility?

_____

Name Phone Number

Comments: _____

_____

_____

PLEASE RETURN THIS NEEDS ASSESSMENT IN ENVELOPE PROVIDED

Training Needs Assessment

October, 1982

Responses: IARF Administrators

Rank	Subject	Score
	Individual Program Planning	
1	Method for Training Clients	9
2	Efficient Data Collection Record-Keeping Methods	8.5
3	Program Coordinator	8
3	Application of Behavior Modification Principles	8
5	Current Assessment Instruments	8
6	Case Management Systems	7.5
6	Behavior Modification Principles	7.5
7	Modifying Assessment Instruments	7.5
8	Interdisciplinary Team Process	6
9	Organizing the Interdisciplinary Team	5.5
10	Involving Parents	5.5
11	Cooperative Staffings with Other Agencies	5
12	Involving Clients	5
	Advocacy, Rights and Human Dignity Issues	
1	Client Rights	7.5
2	Identifying Age-appropriate Materials	7.5
3	Guardianship and Other Protective Services	7
4	Orientation to Advocacy	7
5	Orientation to Self-advocacy	7
5	Organizing an Agency Behavior Management Committee	7
5	Issues in Sex Education	7
6	Confidentiality of Client Records	7
7	How to Apply the Principle of Normalization	6.5
8	Organizing an Agency Human Rights Committee	5.5
	Developmental Disabilities	
1	DD: Health Information	6.5
2	DD: General Information	6.5
	Accreditation	
1	CARF Accreditation	7.5
2	AC/MRDD Accreditation	6
3	Introduction to Voluntary Accreditation	5.5
4	Iowa DSS Regulations Pertaining to Accreditation	5
	Training for Administrators	
1	Supervisory Training	8.5
2	Marketing Methods	8.5

3	"Coaching" (for improved staff performance) Supervisory Methods	8.5
4	Assessing Managerial Effectiveness	8.5
5	Organizing an Agency Volunteer Program	8
6	Cost Estimating	8
6	DOL Compliance	8
7	Time Management Techniques	8
8	Time Management Techniques	8
9	Social Services Block Grant	8
10	Pricing	8
11	S.F. 572 Funds	8
12	Management Problem-solving Techniques	8
13	Solving Employee Dissatisfaction	7.5
14	Writing Job Descriptions and Setting Performance Standards	7.5
15	Appraising Performance	7.5
16	Effective Interviewing Skills	7.5
17	Managing Group Homes	7.5
18	Contract Bidding	7
19	Fiscal Management	7
20	Role of County in Human Service Funding	7
21	Social Security Benefits for Clients	7
22	Affirmative Action	7
23	Wage and Salary Administration	7
23	Managing Semi-independent Individual Apartment Programs	7
24	How to Run Minutes	6.5
24	Personnel Record Keeping	6.5
25	Developing Personnel Policies	6.5
26	Working with the Board of Directors	6.5
27	Special Education Funds	6.5
28	ICF/MR Funding for Community Programs	6.5
29	Insurance Programs	6
30	Overview of the Service Delivery System in Iowa	5

Training for Program Supervisors, Case Managers
Direct Contact Staff and Support Staff

1	Self-esteem Training for Clients	9
2	Management of Aggressive Individuals	8.5
3	How to Shape Social Behavior	8.5
4	Marketing	8.5
5	How to Teach Communication Skills	8
6	How to Teach Self-help Skills	7.5
7	Overview of Commonly Used Medications	7.5
8	How to Teach Recreation Skills	7.5
8	Procedures for Increased Oral Hygiene	7.5
9	How to Prepare Clients for Job Interviews	7.5
10	Other Job Seeking Skills	7.5
11	Vocational Production Design	7.5
12	Food Preparation Procedures	7.5
13	Telephone Techniques	7
14	Use of Modified Diets	7
15	How to Teach Daily Living Skills	7
16	Time Studies (vocational)	7
17	Safety Procedures	7

18	Basic Health Maintenance for Clients	6.5
19	Issues in Nutrition	6.5
20	CPR Training	6
21	Filing and Record Keeping	5.5

Human Potential Training

1	Stress Management	8
2	"Adventures in Attitudes"	7.5
3	Self-esteem Training Programs for Staff	6.5
4	"Lifepower"	6.5
5	Transactional Analysis for Staff	5.5

Appendix B: DACUM Objectives Planning Chart

General Areas of Competencies	Skills Needed to Perform in Each General Area of Competence							
Communicate Effectively		Interpret & Fill in Trouble Shooting & Check Out Charts	Interpret Service & Repair Manuals to Determine Specific Procedures		Identify & Order Parts		Estimate Labor & Parts Costs for Repair Work	Bill Customers & Collect for Service Repairs & Parts
Use & Care for Tools & Equipment	Store & Maintain Tools	Select & Use Combination, Box, & Spanner Wrenches	Select & Use Flat, Robertson & Phillips Screwdrivers	Select & Use Tube Cutters & Flaring Tools	Select & Use Socket Drivers	Use Nozzle Wrench	Select & Use Cutters & Pliers	Install Blades & cut with Hacksaws
Clean & Service Heating Units	Turn Off Power Supply Before Servicing Unit	Take Down, Clean & Install Smokepipes	Remove Panels & Clean Heat Exchanger	Use Vacuum Cleaner	Inspect Chimney & Remove Blockage	Inspect & Change Air Filters	Lubricate Motors & Blower Bearings	Clean & Inspect Blower Assembly
Service & Overhaul Nozzle Assembly				Clean, Replace & Set Electrodes	Remove, Inspect, Clean & Replace Nozzle	Clean, Inspect & Replace High Tension Leads	Inspect & Replace Air Cone	Inspect, Clean & Adjust Nozzle Adaptor
Service & Adjust Fuel Systems	Shut Off Fuel Supply Before Servicing Unit	Inspect & Replace Filter Cartridge	Clean Pump Strainer	Purge Oil Line & Pump Off Air	Identify Types & Sizes of Oil Lines & Fittings	Test Pressure & Adjust Fuel Pump	Replace Fuel Tank Gauge	Inspect Fuel for Water Content & Drain Off
Adjust & Repair Mechanical Systems			Adjust Pulley & Belt Tension & Alignment	Inspect & Replace Belts		Remove & Replace Couplings	Inspect, Clean & Adjust Humidifier	
Service & Repair Electrical Systems & Controls	Check, Adjust Set & Replace Thermostats	Check & Replace or set Fuses & Switches & Overload Switches	Inspect, Test & Adjust Fan Controls	Clean, Inspect Adjust & Replace Stack Relay				Check High Limit Control with Test Light & Replace
Use Measuring & Testing Devices							Use Graduated Cylinder	

Listing of skills needed to perform in each general area of competence is continued on the following page.

Appendix B: DACUM Objectives Planning Chart (continued)

General Areas of Competencies	Skills Needed to Perform in Each General Area of Competence							
Communicate Effectively	Maintain Time & Service Call, Mileage & Expense Records		Interpret Electrical Schematics		Explain & Reassemble Customers of Controls & Safety	Advise Customer of Condition of Unit & Need for Future Repairs		
Use & Care For Tools & Equipment		Select & Use Allen Wrenches	Use Hammers		Cut Sheet Metal Using Compound Snips	Maintain Vehicle Tool & Parts Supply	Drill Sheet Metal Using Electric Drill	Use Fire Extinguisher, Extinguish Fires
Clean & Service Heating Units	Spread Shrouds, Collect Dust & Clean Floors			Cement & Seal Doors & Other Openings on H.W. Furnaces				
Service & Overhaul Nozzle Assembly	Check & Adjust Position of Nozzle Assembly		Inspect Combustion Chamber	Diagnose Flame to Determine Nozzle Malfunction	Adjust Nozzle Air-Fuel Mixture			
Service & Adjust Fuel Systems		Inspect, Clean, Replace Parts & Adjust Carburetors	Remove, Inspect & Replace Pump Gears & Pumps					
Adjust & Repair Mechanical Systems				Check & Replace Circulator Motor & Couplings				
Service & Repair Electrical Systems & Controls	Disconnect & Replace Electric Motors		Change Rotation of Motors for Installation		Inspect & Test Zone Control	Test & Replace Cadium Cell Relay	Diagnose Shorts in Electrical System & Obtain Elect. Assistance	Test & Replace Transformers
Use Measuring & Testing Devices	Use Draft Gauge	Use Test Light	Use Smoke Tester		Use Fuel Pressure Gauges	Use Stack Thermometer		Use Carbon Dioxide Tester

Appendix C: Selecting Instructional Methods

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
1. Training Objectives			
a. To orient staff to policies, rules, course purposes, or learning resources.	L	C	L PI SA
b. To introduce a subject, indicate its importance and present an overview of its scope.	L	C	L PI
c. To give directions to staff on procedures to use in later learning activities.	L	C	SA
d. To provide individualized assistance.	PI	CA	CA
e. To illustrate the application of ules, principles, or procedures.	D	PE	D
f. To provide a means of accelerating individual trainees.	PI	PE	PI COM COM CA
g. To provide advanced work for faster, more able, or more experienced staff.	PI	PE	COM COM SA
h. To provide an alternate means of learning for absentees.	PI	PE	CA SA
i. To build required common background for in-class study of a subject.	PI	C	SA
j. To provide review of content or practice of skills taught in class.	PI	PE	SA

Key:
L - Lecture
C - Conference
D - Demonstration
PE - Practical Exercise
PI - Programmed Instruction
SA - Study Assignment
CA - Coaching
COM - Combination Instruction

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
k. To provide a pattern for later performance and to set standards for that practice.	D	PE	D
l. To teach manual or manipulative operations including the use of tools and test equipment, assembly, disassembly, or repair of equipment.	PE	D	PE PE PI
m. To teach principles or theories (why something works).	PI	PE	L COM COM
n. To teach operation and functioning of equipment (how something works).	PI	PE	L COM COM
o. To teach the execution of tactical movements or team skills.	PE	D	D COM
p. To teach use or control of the voice, balance, breath, or muscles.	PE	D	PE PE
q. To stimulate staff interest and thinking through group participation.	C	-	C
r. To make use of staff's past experience in collecting facts and ideas for the solution of a problem.	C	SA	C
s. To teach safety procedures.	D	PE	COM CA
t. To improve reasoning and problem-solving abilities.	C	SA	C PI
u. To illustrate the application of concepts and principles.	D	C	D D
v. To provide for maintenance of a skill.	PE	-	PI
w. To review, clarify, emphasize, or summarize material.	L	C	L PI

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
x. To evaluate learning.	PE	C	-
2. Content			
a. Deals mainly with concepts and principles.	PI	C	L L COM
b. Deals mainly with reasoning and problem-solving	C	SA	SA PI
c. Deals mainly with manual or manipulative operations.	PE	D	PE PE PI
d. Requires intensive individual practice.	PE	D	PI PI SA
e. Requires intensive group practice.	PE	D	PE
f. Deals with materials which require visual or auditory illustration.	L	D	L PI
g. Requires control over performance to prevent the practice of errors.	PE	D	PI PI
h. Involves hazard to clients, staff, or equipment.	D	PE	CA
i. Requires absolute control over the sequence of presentation.	PI	PE	L PI
j. Demands absolute control over the form of staff response.	PI	PE	PI CA
k. Lends itself to oral presentation.	L	D C	L COM PI
l. Is relatively stable.	PI	PE	PI L
m. Is subject to frequent and radical change.	L	D	C COM COM

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
3. Staff Learners			
a. Are relatively similar in terms of aptitude, ability, speed of learning, prior training, or experience.	L	D	L
b. Have wide differences in aptitude, ability, speed of learning, prior training, or experience.	PI	PE	PI COM COM
c. Are mature enough and sufficiently motivated to work more or less independently.	PI	PE	COM SA
d. Have the level of reading ability required to deal with the instructional material.	PI	-	COM SA
e. Are relatively large in numbers.	PI	-	L L COM
f. Are relatively small in numbers.	D C PE	PE - -	COM
g. Have experiences, backgrounds, or prior training relative to the content.	C	-	PE COM
h. Have sufficient skill to put opinions, ideas, and experiences into words.	C	-	-
i. Have been prepared for the instruction by reading, lecture, or demonstration.	PE	-	C
4. Instructors			
a. Know material to be covered.	L D PE PI C CA	D PE - PE - -	 COM CA

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
b. Have instructional backgrounds.	L D PE C CA	D PE - - -	L COM COM CA
c. Are available.	L D PE C CA	D PE - - -	CA
d. Are unavailable.	PI	PE	PI
e. Polished speakers.	L D	D PE	L COM
f. Competent leaders of group discussion.	C	-	-
g. Carefully rehearsed.	L D	D PE	L
h. Skilled in the use of individual techniques.	PI	PE	T
i. Have adequate time for planning.	L D	D PE	L COM COM
j. Able to work effectively as members of a team.	COM	-	-
k. Masters of a variety of methods and techniques of teaching.	COM	-	-
5. Facilities, Equipment, and Materials			
a. Centralized classroom is available.	L D PE C	D PE -	COM
b. Centralized facilities are lacking.	PI	PE	SA

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
c. Training aids are available.	L D	D PE	L COM COM
d. Seating permits face-to-face communication.	C	-	COM
e. Equipment components are large enough for all trainees to see them clearly.	D	-	-
f. Equipment components are too small for all trainees to see them clearly.	D	-	D
g. Expense of required models is justified.	D	-	COM D
h. Equipment and materials are in adequate supply.	D PE PI	PE - PE	COM
i. Safety precautions are adequate.	D PE	PE -	COM COM
j. The training area is arranged to facilitate close supervision.	PE	-	COM
k. Every staff member has adequate working space.	PE	-	COM
l. Furniture is moveable.	C	-	COM
6. Time			
a. A large amount of material must be taught in a short period of time.	L	D	PI L COM
b. A minimum amount of lead time is available for the preparation of instruction and instructional materials.	L D C	D PE -	COM

Criteria	Primary Method	Supporting Method	Alternative Method
1	2	3	6
c. Lead time for the preparation of instruction and instructional materials is plentiful.	PI	COM	L D COM COM
d. Many staff must complete training at the same time.	L D PE C	D PE - -	L D COM COM
e. Different course completion times are not critical to subsequent training or assignments.	PI	COM	PI COM
7. Other			
a. Individual and continuous staff progress is essential.	PI	PE	PI COM
b. Active staff response is critical to learning.	PI PE	PE -	PI L C
c. Active staff response is not critical to learning.	L D	D -	
d. Standardization of instruction is critical.	PI	PE	L PI
e. Standardization of instruction is not needed.	COM	-	SA
f. Mastery of a skill is critical.	PE	-	PI PI
g. An accurate record of responses is needed.	PI PI	PE PE	L D
h. Immediate correction of errors is critical.	PI PI PE	PE PE -	L D
i. Problems of integration with other instructional methods are not critical.	PI PI PE	PE PE -	L

Appendix D: A Selected Resource Listing of Need Assessment and Curriculum Development Materials

Many fine publications exist that explore in depth the completion of needs assessment and the development of curriculums. This resource listing does not attempt to be all inclusive. The bibliographic material for each publication may lead the reader to further resources that will assist in the planning and development of in-service training programs.

Anderson, D. (1981). Evaluating curriculum proposals: A critical guide. NY: Wiley.

Anderson, M. (1949). Teaching apprentices and preparing training materials. Chicago, IL: American Technical Society.

Argyris, C. (1976). Increasing leadership effectiveness. New York, NY: Wiley.

Association for Supervision and Curriculum Development. (1976). Perspectives on curriculum development, 1776-1976. Washington, DC: Author.

Bartel, C. (1976). Instructional analysis and materials development. Chicago, IL: American Technical Society.

Bass, B. (1966). Training in industry: The management of learning. Belmont, CA: Wadsworth Publishing Company.

Berry, D. (1980). A bibliographic guide to educational research. (Second edition). Metachen, NJ: Scarecrow Press.

Bienvenu, B. (1969). New priorities in training: A guide for industry. New York, NY: American Management Association.

Black, J. (1961). Developing competent subordinates. New York, NY: American Management Association.

Borich, G. (1974). Evaluating educational programs and products. Englewood Cliffs, NJ: Educational Technology Publications.

Broadwell, M. (1969). The supervisor and on-the-job training. Reading, MA: Addison-Wesley Publishing Company.

Cenci, L. (1966). Skill training for the job. New York, NY: Pitman Publishing Corporation.

Centre for Educational Research and Innovations. (1975). Handbook on curriculum development. Washington, DC: Organization for Economic Cooperation and Development.

Chabotar, K. (1974). Evaluation guidelines for training programs. Lansing, MI: Michigan Department of Civil Service.

Cooper, A. (1942). Employee training. New York, NY: McGraw-Hill Book Company.

Craig, R. (1976). Training and development handbook: A guide to human resource development. New York, NY: McGraw-Hill.

Cushman, F. (1940). Training procedure: A discussion of the problems encountered in planning, organizing, operating, and maintaining efficient training programs in industrial, business, public service organizations. New York, NY: J. Wiley & Sons, Inc.

Dale, E. (1972). Building a learning environment. Bloomington, IN: Phi Delta Kappa Education.

Davis, L. (1975). Planning, conducting, evaluating workshops: A manager's guide to staff development. Austin, TX: Learning Concepts.

DeCarlo, C. (1966). Education in business and industry. New York, NY: Center for Applied Research in Education.

Denova, C. (1971). Establishing a training function: A guide for management. Englewood Cliffs, NJ: Educational Technology Publications.

Gall, M. (1981). Handbook for evaluating and selecting curriculum materials. Boston, MA: Allyn and Bacon.

Galloway, C. (1976). Psychology for learning and teaching. New York, NY: McGraw-Hill.

Gardner, J. (1981). Training interventions in job-skill development. Reading, MA; Addison-Wesley.

Grabowski, S. (1981). Preparing educators of adults. San Francisco, CA: Jossey-Bass.

Illinois Department of Mental Health, Learning Media Institute. (1972). LMI abstracts: Materials for staff development and training. Decatur, IL: The Institute.

Kaufman, R. (1976). Needs assessment: What it is and how to do it. San Diego, CA: University Consortium for Instructional Development and Technology.

Kellogg, M. (1967). Closing the performance gap: Results-centered employee development. New York, NY: American Management Association.

Killian, J. An in-service training program for rehabilitation personnel. Milwaukee, WI: Jewish Vocational Service.

Kirkpatrick, D. (1976). A practical guide for selecting and training potential foremen and supervisors. Milwaukee, WI: University of Wisconsin Extension.

Langdon-Dahm, M. (1975). An affective learning system for group facilitators. Centerville, OH: Learning Development Systems.

Lord, K. (1977). The design of the industrial classroom. Reading, MA: Addison-Wesley.

Mager, R. (1970). Analyzing performance problems; or, you really oughta wanna. Belmont, CA: Fearon Publishers.

McGeehee, W. (1961). Training in business and industry. New York, NY: Wiley.

McNeil, J. (1976). Designing curriculum: Self-instructional modules. Boston, MA Little, Brown.

Morgan, H. (1975). Industrial training and testing. New York, NY: McGraw-Hill Book Company.

Nadler, L. (1982). Designing training programs: The critical events model. Reading, MA: Addison-Wesley Publishing Company.

Nicholls, A. (1978). Developing a curriculum: A practical guide. New York, NY: G. Allen & Unwin.

Odiorne, G. (1975). Training by objectives. Westfield, MA: MBO, Inc.

Ofiesh, G. (1965). Programmed instruction: A guide for management. New York, NY American Management Association.

Oliver, A. (1978). Maximizing minicourses: A practical guide to a curriculum alternative. New York, NY: Teachers College Press, Columbia University.

Otto, C. (1970). The management of training: A handbook for training and development personnel. Reading, MA: Addison-Wesley Publishing Company.

Pinto, P. (1978). A study of professional training and development roles and competencies: A report. Madison, WI: American Society for Training and Development.

Planty, E. (1948). Training employees and managers for production and teamwork. New York, NY: Ronald Press Company.

Posner, G. (1978). Course design: A guide to curriculum development for teachers. New York, NY: Longman.

Rose, H. (1964). The development and supervision of training programs. Chicago, IL: American Technical Society.

Rosenberger, H. (1956). How to organize and administer an employee training program: A manual for executives. Washington, DC: Society for Personnel Administration.

Saint, A. (1974). Learning at work: Human resources and organizational development. Chicago, IL: Nelson-Hall Company.

Sauer, S. (1981). Planning in-house training: A personal system with an organizational perspective. Austin, TX: Learning Concepts.

Stokes, P. (1966). Total job training: A manual for the working manager. New York, NY: American Management Association.

Stradley, W. (1975). Administrator's guide to an individualized performance results curriculum. New York, NY: Center for Applied Research in Education.

Stroh, T. (1969). The uses of video tape in training and development. New York, NY: American Management Association.

Suessmuth, P. (1978). Ideas for training managers and supervisors: Useful suggestions, activities. LaJolla, CA: University Associates.

Taylor, N. (1976). Selecting and training the training officer. London, Institute of Personnel Management.

Tracey, W. (1968). Evaluating training and development systems. New York, NY: American Management Association.

Tracey, W. (1981). Human resource development standards: A self-evaluation manual for HRD managers. New York, NY: AMACOM.

Verner, C. (1971). Psychological factors in adult learning and instruction. Washington, DC: Adult Education Research.

Warren, M. (1979). Training for results: A systems approach to the development of human resources. Reading, MA: Addison-Wesley Publishing Company.

Wexley, K. (1981). Developing and training human resources in organizations. Glenview, IL: Scott, Foresman.

Wolfbein, S. (1967). Education and training for full employment. New York, NY: Columbia University Press.

Zemke, R. (1982). Figuring things out: A trainer's guide to needs and task analysis. Reading, MA: Addison-Wesley.

Zenger, W. (1973). Writing and evaluating curriculum guides. Belmont, CA: Fearon Publishers.

Appendix E: Forms Used for In-service Training at Area Residential Care, Inc., Dubuque, Iowa

TO:

FROM: Gary Gansemer and Karen Lange

DATE:

RE: In-service Training

The following staff are scheduled for in-service on:

DATE: _____

TIME: _____

PLACE: _____

TOPIC: _____

_____ _____ _____

_____ _____ _____

_____ _____ _____

_____ _____ _____

Please inform us of any staff not able to attend in-service.

A.R.C. IN-SERVICE EVALUATION

TOPIC: _____ DATE: _____

INSTRUCTOR: _____

	High				Low
Quality	5	4	3	2	1
Importance to You in Your Job	5	4	3	2	1

What did you like about the session? _____

_____

_____

What can be improved? _____

_____

_____

TO:

FROM: Gary Gansemer

DATE:

RE: In-service Training

You are scheduled for in-service training:

DATE: _____

TIME: _____

PLACE: _____

TOPIC: _____

Your attendance is mandatory unless your department director grants an exemption prior to the session.

cc: Department Director

TO: Gary Gansemer

FROM:

DATE:

_____ has completed the self-instructed courses
(employee)

listed below.

	Pretest (Score)	Tested Out (Yes/No)	Posttest (Score)
Seizure Disorders	_____	_____	_____
Intro to Mental Retardation	_____	_____	_____
Intro to Behavior Techniques	_____	_____	_____

_____
Program Supervisor or Director

AREA RESIDENTIAL CARE
Attendance Record

NAME: _____ DEPT: _____ AD: _____

TOPICS	N/A	DATE	AUTHORIZED BY:
Job Orientation			
Intro to Mental Retardation			
History & Philosophy of ARC			
Parents Perspective			
Music Therapy			
Speech & Hearing Disorders			
Sexuality of the D.D.			
Behavior Modification			
Client Rights			
Abuse & Neglect			
Safety Procedures			
Physical Disabilities & Related Procedures			
Medical Problems & Procedures			
Medications			
Nutrition			
Individual Program Planning			
Mandt Training			

ADDITIONAL REQUIREMENTS FOR RESIDENT ATTENDANT CERTIFICATION
Optional for Other Staff

Multi-Media First Aid			
C.P.R.			
Vitals			
Bathing			
Housekeeping			
Food Preparation			
Communication			
Supervision of Daily Living			
Recreation and Leisure			

Appendix F: In-Service Training Curriculum Used at Area Residential Care, Inc., Dubuque, Iowa

AREA RESIDENTIAL CARE

RESIDENT ATTENDANT COURSE

Outline

		Hours
Module 1	Job Orientation and Overview of Mental Retardation	8
Module 2	Communication and Interpersonal Skills	2
Module 3	Working Environment	4
Module 4	Human Needs	9
Module 5	Medical Problems and Related Procedures	20.25
Module 6	Disabilities and Related Procedures	3.75
Module 7	Nutrition and Food Preparation	2
Module 8	Individual Program Planning	8
Module 9	Behavior Patterns	13.75
Module 10	Client Rights/Abuse Neglect	1.75
Module 11	Recreation, Leisure and Community Resources	2.5
	Total Hours	75

*For all staff

1/84

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 1 TITLE: Job Orientation and Overview of Mental Retardation

GOAL: For staff to become familiar with Agency and Residential Department

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. History & Philosophy of ARC* -To be familiar with the history & philosphy of Area Residential Care.	Gary Warner	I. History II. Philosphy--Normalization III. Agency T.O. IV. Accreditation	Lecture Handouts	1 1/2 hours
B. Mental Retardation Introduction* •	Self-taught	I. MR/DD Pretest Developmental Disabilities Overview of Mental Retardation Historical Summary Levels of Mental Retardation Causes of Retardation Characteristics of Retarded Persons Social Competence Learning Disabilities Affective Traits The Normalization Principle The Developmental Mode Post Test II. Mental Illness	Pre/Post Test Programmed Text No handouts	1 1/2 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 1 TITLE: Job Orientation and Overview of Mental Retardation

GOAL: For staff to become familiar with Agency and Residential Department

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
C. Job Orientation* -To complete orientation to the job before having direct care responsibilities	Program Supervisor	Policy & Procedures Manuals Job Descriptions ACMRDD, DSS and Board of Health Regulations Client Files Employee Handbook	Lecture/Demonstration/ Reading Handouts	4 hours
D. Parents Perspective* -To become familiar with the experiences and views of parents of the developmentally disabled	Roy Schmeichel	I. Birth of a Retarded Child and How It Affects the Parents with Resulting Traumas A. Disbelief B. Anger C. Self Incrimination II. Relationships with Other Relatives and How it Affects Them and Parents III. Relationships with Other Siblings IV. Ongoing Stress & Created Problems in Family V. Reactions of Neighbors & Friends VI. Reaction of Siblings as They Grow and Develop A. Early Age B. Growing Years C. Adolescence	Lecture Handouts	1 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 1 TITLE: Job Orientation and Overview of Mental Retardation

GOAL: For staff to become familiar with Agency and Residential Department

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		D. Why Some Siblings Never Accept & Adjust To the Retarded Child		
		VII. School Years & Problems		
		VIII. Constant Impending Fears of Parents Regarding Their Retarded Child		
		A. Sexual Attacks		
		B. Adolescent Development		
		C. Possible Marriage		
		IX. Future		
		A. Providing for Retarded Child After Parents are Deceased		
		B. Guardianship		
		C. Keep Retarded Child Active and Involved		
		X. Role of Clerics		
		XI. Relationship with Care Providers		
		XII. Labels and Devastating Effects to Retarded Child Resulting from Labels		
		XIII. There is Hope & Happiness		
		A. Redefining Relationship with Normal Siblings & Retarded Person with Other Siblings During Adulthood		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 2 TITLE: Communication and Interpersonal Skills

GOAL: To provide staff with knowledge and practice in communication and interpersonal skills

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Communication Skills -To define effective communication and identify types of communication	Dan Emmert Mary Drees	I. Communication A. General Definition B. Types 1. Verbal 2. Non-verbal 3. Written C. Sender Skills 1. Questioning 2. Verbal Skills/ pitch,tone,volume 3. Gestural Skills 4. Writing Skills 5. Presentation Skills D. Receiver Skills 1. Listening Skills 2. Comprehension and Retention 3. Feedback E. Problem Analysis Techniques 1. Brainstorming 2. Investigation of Problems F. Special Groups 1. Administration 2. Peers 3. Professional Service Staff 4. Parents 5. Public 6. Client/Resident	Lecture Handouts	2 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 2 TITLE: Communication and Interpersonal Skills

GOAL: To provide staff with knowledge and practice in communication and interpersonal skills

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		G. Basic Interview Techniques H. Telephone Communication		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 3 TITLE: Working Environment

GOAL: To provide staff with information to handle emergency situations

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Safety Procedures* -To learn fire safety and emergency evacuation procedures for dorms, apartments, and group homes.	Nancy Huttig Cathy Chambers	I. Safety A. Fire Prevention 1. Elements of Fire a. Fuel b. Oxygen c. Heat 2. Causes & Prevention a. Smoking b. Electrical c. Spontaneous d. Rubbish e. Cooking 3. Fire Emergencies and Drills a. Agency Policies b. Reporting c. Drill and Evacuation Procedures d. Use of Fire Extinguishers 4. Sources of Information a. Fire Drills b. Learn Not to Burn c. Fire Department B. Disasters 1. Definition 2. Plan	Lecture/Discussion	2 1/2 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 3 TITLE: Working Environment

GOAL: To provide staff with information to handle emergency situations

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		C. Environmental Accidents		
B. Housekeeping Techniques -To be familiar with basic housekeeping techniques for safety and sanitation purposes.	Roger Conry	II. Aseptic Techniques A. Definition B. Transfer of Bacteria C. Prevention 1. Handwashing 2. Antiseptic D. Housekeeping Agency Policy and Procedures on: A. Soiled and contaminated clothing B. Infection control C. Washing & handling of dishes D. Laundry procedures E. General cleaning requirements F. Specific cleaning Requirements	Lecture Handouts	1 1/2 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 4 TITLE: Human Needs

GOAL: To explore basic human needs

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Supervision of Daily Living -To assure the client's physical needs are met	Emmy Miller, RN	I. Observation A. Signs & Symptoms 1. Objective 2. Subjective 3. General Signs of Illness B. Reportable Symptoms 1. Definitions and Discussions II. Human Needs A. Food Intake (fluid intake) B. Sleep, Rest, Exercise 1. Control of Environment 2. Safety C. Prevention of Infection & Communicable Condition 1. Handwashing 2. Cross Contamination 3. Infection Control Policy Direct Care: Daily Observations Log Recording Reporting to Nursing III. Daily Hygiene Measures A. Oral Hygiene 1. Brushing (teeth, tongue)	Handout	4 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 4 TITLE: Human Needs

GOAL: To explore basic human needs

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		2. Flossing 3. Hyperplasia 4. Bone Destruction 5. Demonstration 6. Return Demonstration B. Skin Care 1. Tub/Shower/Daily Required (minimum) 2. Care of the Eyes 3. Care of the Ears 4. Dry Skin (clean, dry, moisturize) 5. Oily Skin (clean, dry powder) 6. Deodorant C. Hair Care D. Genital Hygiene (perineal care) 1. Male 2. Female 3. Procedures E. Foot Care 1. Problems (dry, corns, callouses, athletes foot) 2. Prevention/ Treatment 3. Proper Foot Wear F. Nail Care 1. Toes, Fingers		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 4 TITLE: Human Needs

GOAL: To explore basic human needs

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		2. Procedures on clipping 3. Hygiene & Safety G. Menstrual Cycles 1. Hygiene 2. Monitor (proper use of products) 3. Collect Data (dates, length, flow) 4. Report to Nursing (data plus problems) 5. Dysmenorrhea IV. Elimination Needs A. Bowel 1. Diet 2. Fluid (H_2O) Intake 3. Exercise 4. Privacy 5. What's a NORMAL pattern? 6. Know your client's individual normal pattern 7. Associated behaviors 8. Chemical use - diarrhea constipation 9. Collect Data 10. Report to Nursing		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 4 TITLE: Human Needs

GOAL: To explore basic human needs

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		B. Bladder 1. Incontinence (Behavior vs. Pathophysiology) 2. Fluid (H_2O) Intake 3. Strong Urine Odor 4. Signs & Symptoms of Possible Infection 5. Collecting specimens		
B. Bathing Demonstration -To understand bathing techniques	Emmy Miller, RN	I. Bathing A. Purpose B. Types of Baths C. Demonstration of Complete Bed Bath 1. Equipment (soap, towels, powder, lotion) 2. Environment 3. Comfort 4. Socialization 5. Back Massage No return demo		3/4 hour
C. Vital Signs -To demonstrate the ability to measure vital signs	Emmy Miller,RN	I. Temperature II. Pulse III. Blood Pressure	Lecture Demonstration Discussion	2 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 4 TITLE: Human Needs

GOAL: To explore basic human needs

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
D. Sexuality of D.D.* -To learn to be sensitive to and deal with the sexuality needs of the MR	Gary Gansemer Emmy Miller, RN	I. Introduction A. Definition-Group Input B. Rumors-Telephone Game II. Film III. Agency Policy and Procedures IV. Case Study-Group Exercise V. Characteristics of the Sex Educator VI. Resources	Lecture/Handouts/ Exercises	2 1/4 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 5 TITLE: Medical Problems and Related Procedures

GOAL: To increase the skills to adequately meet a clients medical problem

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Nursing Policies & Procedures*	Emmy Miller, RN	I. Functions A. Appointments (dental, physical, health concerns, injuries) B. Administration of Medications C. Monitor Seizures/ Blood Levels D. Health Consultant to Staff Regarding Clients (RN, LPN) E. Health Record Keeping (height/weight, ADL, Menses, T.T., etc.) F. IPP's G. Group Home Visits H. Special Diets - Nutritional Concerns I. Nursing Policy/ Procedure Handbook J. Notifying Physicians II. Workmen's Comp Policy	Lecture Handouts Handout	3/4 hours
B. Medical Problems* -To understand how to deal with client medical problems	Emmy Miller, RN	I. Seizures (Epilepsy) A. Definition B. Types 1. Grand mal 2. Petit mal 3. Psychomotor 4. Jacksonion C. Aura	Lecture Handouts	2 1/4 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 5 TITLE: Medical Problems and Related Procedures

GOAL: To increase the skills to adequately meet a clients medical problem

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		D. Causes E. Care of the Client During Seizure (P.O.R.K.) *Reporting (recording) F. Care of the Client After Seizure 1. Post-ichthal state G. Anti-convulsive Drug Therapy 1. Side Effects/Toxic Signs (Handout) 2. Indications for Direct Care Staff 3. Indication for Nursing H. Glossary II. Downs Syndrome A. Characteristics 1. Similarities 2. Uniqueness B. Atlanto-axil Dislocation C. Skin Problems D. Ear Problems III. Diabetes A. Pancrease-Insulin B. Management 1. Diet 2. Oral Medications 3. Insulin Injections		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 5 TITLE: Medical Problems and Related Procedures

GOAL: To increase the skills to adequately meet a clients medical problem

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		IV. Common Medical Emergencies A. Lacerations B. Injury to Eyes C. Injury to Head D. Injury to Back E. Vomiting/Diarrhea 1. Policy for client illnesses requiring nursing management F. Choking - Heimleich 1. Film 2. Practice G. Procedure for Client Emergencies Between 10:00 pm - 7:00 am		
C. Multimedia First Aide -To become certified by Red Cross in Basic First Aide	ARC Staff	Multimedia Basic First Aide I. Introduction II. Respiratory Emergencies III. Direct Pressure, Elevation IV. Poisoning V. Burns VI. Bandaging VII. Head Injuries, Internal & Gunshot Wounds VIII. Injuries to the Eye IX. Infection, Tetanus & Bites X. Splints XI. Fractures XII. Fainting/Epilepsy XIII. Escaping from Fire	Lecture/Reading/Exercise/Practice	8 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 5 TITLE: Medical Problems and Related Procedures

GOAL: To increase the skills to adequately meet a clients medical problem

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		XIV. Electrical Emergencies XV. Exposure to Radiation XVI. Emergency Rescues		
D. CPR -To become certified through the American Heart Association in CPR	ARC STAFF	CPR I. CPR Basic II. Risk Factor III. Early Warnings IV. Handling an Emergency V. The Unconscious Victim VI. Critical Timing VII. Legal Considerations VIII. CPR Action Diagram IX. The ABC's of CPR X. Breathing XI. Circulation XII. Two Person Rescue XIII. Conscious with Airway Obstruction XIV. Infants and Children XV. Enrichment		8 hours
E. Medications* -To be familiar with medications used in therapy for physical & psychological symptoms	Peggy Walz, LPN	I. Use of Drugs A. Replacement Therapy B. Alleviate Symptoms C. Diagnosis D. Cure II. Health Personnel Involved A. Physician B. Pharmacist C. Licensed Nurse D. Certified Med Aide	Lecture Handouts	1 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 5 TITLE: Medical Problems and Related Procedures

GOAL: To increase the skills to adequately meet a clients medical problem

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		III. Rules & Regulations A. Storage B. Administration of Drugs IV. Special Considerations for Clients on Drug Therapy A. Types of Drugs 1. Behavioral 2. Antibiotic 3. Cathartics B. Therapeutic Reaction C. Side Effects V. Observations A. Know Your Clients 1. General Appearance 2. Behaviors B. Be Aware of Their Medications C. Report		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Physical Disabilities and Related Treatment Procedures* -To be aware of the most common physical disabilities	Anne Stewart, OTR	I. Description of O.T. A. Identification as part of ARC B. Functional Use of Everyday Activities II. O.T. Services A. Methods & Test Used in Client Assessment B. Treatment Modalities 1. Adaptive Devices a. Self Care b. Feeding c. Splinting-Braces d. Positioning-Transfer e. Ambulation 2. Exercises a. Range of Motion b. Upper Extremity Strengthening c. Cardio-vascular Programs 3. Perceptual-Motor & Developmental Disabilities a. Visual discrimination b. Gross & Fine Motor Coordination	Lecture Demonstration Handouts	1 3/4 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		c. Tactile-defensive d. Sensory Losses i. Blind ii. Deaf III. Procedures for Client Referral to OT IV. Clients' Physical Disabilities A. Cerebral Palsy B. Scoliosis C. Syndromes Associated with Mental Retardation D. Diseases Affecting Neuro-muscular Functioning V. Staff Experiencing Use of Adaptive Devices, Equipment, Assessment Tools, Using Proper Techniques-Body Mechanics, etc.		
B. Speech & Hearing Disorders -To understand common hearing & speech disorders & their treatment approaches	Karen Ricketts, M.S.	I. General Overview A. Full-Time Therapist and Part-Time Aide B. Evaluation, Consultation, Direct Therapy II. Speech vs. Language - Who Fits Where & Why III. Speech Programs A. Articulation Factors 1. Downs Syndrome	Lecture Demonstration Handouts	1 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		2. General Structural Anomalies 3. Hearing IV. Language "Verbal and Non-Verbal" A. Receptive Language-Define 1. Attending 2. Matching Items, Pointing to Pictures on Command 3. Object Labeling & Recognition 4. Following Commands & Concepts Reasoning - Talk About Autism Characteristics 5. Memory Constraints 6. Yes/No Responses B. Expressive Language Verbal & Non-Verbal 1. Yes/No Response 2. Simple Vocabulary "Content Words" 3. Singing 4. Phrases & Sentences V. Deafness & Hearing Loss A. Definition & Causes B. Types of Loss and Treatment		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		1. Conductive 2. Sensori-neural 3. Mixed C. Communicative Recommendations "Dealing with Hard of Hearing" VI. Manual Communication "Total Communication" A. System for Deaf People B. System Used by Client with Little or No Language or Who are Unintelligent C. Basic Rules 1. Staff Sign to Clients and Expect Clients to Sign Back a. Learn by Example b. Need to Associate word with sign 2. Sign & Speak a. Gives Client More Input Visual and Auditory b. Sign Concrete Words 3. Client Variations		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		a. Physical Limitations b. Memory Span c. Level of prompting, "GA, GP, VP, I" 4. Demonstration of Signs		
C. Music Therapy* -To understand role of music therapy in client treatment	Eileen Frey, RMT	I. General Information A. Definition of Music B. History of Profession C. Why Music as a Therapeutic Tool II. Music Therapy at ARC A. Duties of Music Therapist at ARC B. Major Areas of Need Covered by the Music Therapist C. Review Music Therapy Program Priorities D. Review Guidelines for Referral to Music Therapy III. Relaxation A. Basic Discussion on Stress B. Programs Used by Music Therapist at ARC C. Review Relaxation Checksheet		1 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 6 TITLE: Disabilities and Retarded Procedures

GOAL: To be aware of client disabilities and methods of treatment

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		D. Review Guidelines for Referral to Relaxation Therapy E. Experience a Short Progressive Relaxation Program IV. Group Music Therapy A. Review Group Session Goals & Objectives B. Experience Some Group Music Therapy Activity C. Discuss Non-musical Needs Worked on Through the Music Therapy Activities		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 7 TITLE: Nutrition and Food Preparation

GOAL: To understand basic principles of nutrition and food preparation

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Nutrition* -To understand basic information as it relates to clients	Sally Voels, Dietitian	I. Introduction to Nutrition A. Pre-Test B. Basic Four Food Groups and Amounts Needed 1. Meat/Meat Products 2. Milk/Dairy Products 3. Fruits/Vegetables 4. Breads/Cereals C. Key Nutrients for Each Food Group D. Food-Medication Interaction 1. Primary Medications Used 2. Possible Side Effect E. Modified Diets 1. Emphasis on Calorie Restricted Diets 2. Altered Food Consistencies F. Dietary Intervention With Bowel Elimination G. Hydration H. Questions I. Post-Test	Lecture Pre & Post Test	1 hour
B. Food Preparation -To understand proper food preparation procedures	Verna Cardy, CDA	I. Licensure Regulations A. Food Supplies 1. General a. Contamination b. Labeling	Lecture	1 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 7 TITLE: Nutrition and Food Preparation

GOAL: To understand basic principles of nutrition and food preparation

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		2. Special Requirements a. Fluid Milk b. Pasturized Milk c. Fish d. Eggs B. Food Protection 1. General 2. Emergency C. Food Storage 1. General a. Type b. Containers c. Conditions d. Packaging e. Identifying 2. Refrigerated Storage 3. Hot Storage D. Food Preparation 1. General 2. Fruits & Vegetables 3. Hazardous Food 4. Dry Milk 5. Eggs 6. Reheating 7. Non Dairy Products 8. Thermometers 9. Thawing E. Food Service 1. Hazardous Food 2. Milk		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 7 TITLE: Nutrition and Food Preparation

GOAL: To understand basic principles of nutrition and food preparation

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		3. Nondairy 4. Condiments 5. Ice 6. Reservice 7. Tableware		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 8 TITLE: Individual Program Planning

GOAL: To learn how to develop an Individual Program Plan

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. IPP Training* -To be able to write an IPP and participate effectively in meetings	Gary Gansemer, MSW Jane Dubert Ann Wojdyla	I. Individual Program Plan A. Overview of IPP B. Team Process II. Explanation of ARC System III. Components A. Goals B. Objectives C. Strategies D. Data Collection	Lecture Videotapes Handouts Exercises	8 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 9 TITLE: Behavior Patterns

GOAL: To increase skills in successful handling and understanding of client behavior patterns

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Behavior Modification* -To understand basic behavior modification principles & their application at ARC	Ann Wojdyla	I. Maslow's Hierarchy of Needs A. Psychological B. Safety C. Belongingness & Love Needs D. Self-esteem Needs E. Self-Actualization Needs F. How This Hierarchy Fits into Behavior Modification II. Overview of Behavioral Approach A. What's Behaviorism About B. Why Program C. Behavioral ABC's D. Defining Behavior E. Assessing Adaptive Behavior III. Measuring Behavior A. Measuring Behavior B. Types of Data C. How to Graph Behavior 1 hr. Post test given to small groups at this time. Large group will then review the answers. IV. Goal Setting/Increasing Behavior A. Goal Setting	Lecture	5 3/4 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 9 TITLE: Behavior Patterns

GOAL: To increase skills in successful handling and understanding of client behavior patterns

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		B. Increasing Behavior C. Type of Reinforcement D. How to Effectively Increase Behavior E. Schedule of Reinforcement 1 hr. Post test given to small group at this time. Large group will review the answers V. Discussion Behavior A. What is a Punisher B. How to Decrease Behavior Effectively C. Ways to Decrease Behavior D. Behavior Management Guidelines VI. Teaching New Behaviors A. Why Teach New Behaviors B. Task Analysis C. Techniques for Teaching New Skills D. Skill Generalization 1 hr. Post test given to small groups, large group will then review the answers. VII. Developing and Implementing Programs		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 9 TITLE: Behavior Patterns

GOAL: To increase skills in successful handling and understanding of client behavior patterns

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		A. Selecting Behaviors to Change or Teach B. Steps in Developing Behavior Change Programs C. Steps in Teaching a New Skill D. Your Relationship with the "Learner" E. Consistency in Programming F. Program Evaluation 1 hr. Post test given to small group and the answers reviewed by the large group		
		VII. Behavior Modification Policy & Procedures at ARC A. Agency Hierarchy B. Behavior Management Committee C. Human Rights Committee D. Isolation Time Out E. Mechanical Restraint F. Definition of Hierarchy		
B. MANDT Training* -To be familiar with the	Dan Emmert	I. Introduction A. Graded System B. Stance Training &	Lecture/Demonstration/ Practice Handouts	8 hours

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 9 TITLE: Behavior Patterns

GOAL: To increase skills in successful handling and understanding of client behavior patterns

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
MANDT system to reduce injury and eliminate abuse to persons with "acting-out" behaviors and to reduce injuries to staff members		Body Movement 1. Gestural 2. Verbal 3. Body Positioning II. Getting Out of or Gaining Control of an Individual Using Least Amount of External Control A. Finger Holds B. Wrist Holds C. Upper Arm Holds D. Shoulder Holds E. Clothing III. Escorting, Holding, Restraining, Lifting and Transporting Techniques IV. Other Techniques A. Hairpulling B. Hand Choke C. Arm Choke D. Head Lock E. Pinching F. Biting G. Hugging H. Being Pushed Against Wall I. Shaking J. Kicked While Sitting/ Standing K. Chair Throwing/Jabbing L. Separating Two People		

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 10 TITLE: Client Rights/Abuse and Neglect

GOAL: This unit will increase the awareness of abuse and neglect as it relates to Iowa Law and to the ethical/professional responsibilities of an employee

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Client Rights* -To know and protect the rights of our clients	For all staff	I. Client Rights A. Professional Services B. Compensation for Work C. Housing D. Guardianship E. Sexuality F. Privacy G. Protection from Harm H. Due Process I. Assembly J. Religion K. Business Transactions II. ARC Human Rights Committee A. Rationale B. Purpose C. Composition D. Meeting Schedule E. Responsibilities F. Procedures	Lecture Handouts	1 hour
B. Abuse/Neglect* -Determine initial understanding of what is abuse/neglect	For all staff	List of questions to be answered yes/no on a variety of abuse/neglect related situations.	Pre-test	3/4 hour
-Present definitions of abuse/neglect and the resultant impact on daily employee work dynamics	For all staff	Definitions of Abuse Definition of Neglect Review Situational Definitions of Abuse/Neglect	Lecture	

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 10 TITLE: Client Rights/Abuse and Neglect

GOAL: This unit will increase the awareness of abuse and neglect as it relates to Iowa Law and to the ethical/professional responsibilities of an employee

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
-Review Iowa Abuse/Neglect Law and Assault/Battery implications		Review law and resultant policy and procedures of the Agency.	Lecture	
-Determine level of understanding of this presentation		A. Summary B. Questions & Answer Period C. Post-test Questionnaire D. Evaluation of Presentation	Handouts to take with	Discussion

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 11 TITLE: Recreation, Leisure and Community Resources

GOAL: To recognize the significance of recreation in the planning of recreational programs for clients

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
A. Recreation & Leisure -To recognize various components that need to be taken into consideration before actual program planning takes place	Moses Prasad	I. The Rationale for Therapeutic Recreation Service A. Definitions 1. Leisure Time 2. Recreation 3. Therapeutic recreation B. Therapeutic Recreation Programs C. Value of Plan 1. Social 2. Cognitive 3. Behavioral 4. Physical D. Developmental Characteristics of Play 1. Individual Play a. Imitative Play b. Fantasy Play c. Parallel Play 2. Parallel Play 3. Group Play a. Cooperative Play b. Competitive Play E. Assessments	Lecture, Discussion Handout "Leisure Time Rights" Handout "Components of Movement" Handout "Labin Theory" Handout "Development Characteristics of Play" Handout "Activity Analysis Rating Form"	1/2 hour
B. To recognize the many areas of needs that recreation programming aides in		II. Therapeutic Recreation Service A. Therapeutic Use of	Discussion, Lecture Handout "Therapeutic Use of Recreation"	1/2 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 11 TITLE: Recreation, Leisure and Community Resources

GOAL: To recognize the significance of recreation in the planning of recreational programs for clients

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
developing; also, the many various types of activities that can be offered		Recreation 1. Social Development 2. Physical Develop- 3. Vocational Development 4. Constructive Use of Leisure Time B. Overall Goals of Recreation Programming C. Range of Activities 1. Arts & Crafts 2. Dance 3. Drama 4. Entertainment 5. Hobbies or Special Interests 6. Music 7. Nature & Outdoor Recreation Activities 8. Outing Activities 9. Physical Activities 10. Social Activities 11. Special Events	Handout "Overall Goals of Recreation Programming" Handout "Range of Activities" Handout "Organization Suggestions to Consider"	
C. To discuss the psychological, social and physical aspects of participation in Special Olympics		I. Introduction to Special Olympics A. What is Special Olympics B. Who Qualifies C. What Sports are volved		1/2 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 11 TITLE: Recreation, Leisure and Community Resources

GOAL: To recognize the significance of recreation in the planning of recreational programs for clients

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		II. Psychological A. Positive Experience B. Better Self-Image III. Social A. Sportsmanship B. Opportunity to Have Experience in Sports IV. Physical A. Components of Fitness 1. Strength 2. Flexibility 3. Endurance 4. Balance 5. Ability 6. Speed 7. Coordination 8. Reaction Time B. How Fitness Attributes Affect Performance V. Training Suggestions A. Proper Warm-ups B. Experience Before Events C. Provide Training According to Individual Needs		
D. To discuss success-oriented methods of playing games		I. Selection of Appropriate Activities A. Factors to Assess Selection of Leisure Skills	Discussion/Demonstrations/Handouts	1/2 hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 11 TITLE: Recreation, Leisure and Community Resources

GOAL: To recognize the significance of recreation in the planning of recreational programs for clients

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
		B. What is the Need for Adapting Activities C. Teaching Suggestions II. Suggestions for Modifying Activities A. Arts and Crafts B. Swimming C. Softball D. Soccer E. Basketball		
E. To learn to use the free resources available in Dubuque and surrounding area		I. Follow A.R.C. Guidelines for Taking Clients Out Into the Community A. Discuss the Guidelines B. Discuss Situations Which May Occur During An Outing 1. Situation A 2. Situation B II. Discuss the Resources Available in Our Area III. Outings Which are Free or at a Discount for A.R.C. A. Which Places Allow A.R.C. Discounts or Free Admission B. The Procedure to Receive these Benefits	Lecture/Discussion and Handouts Handouts on "Guidelines for Client in the Community," "Discount and free outing"	
F. To recognize the importance of the services volunteers		I. Reasons why Individuals Donate Precious Time		2½ Hour

AREA RESIDENTIAL CARE RESIDENT ATTENDANT COURSE

MODULE NUMBER: 11 TITLE: Recreation, Leisure and Community Resources

GOAL: To recognize the significance of recreation in the planning of recreational programs for clients

OBJECTIVE	INSTRUCTOR	CONTENT OUTLINE	METHODS AND MATERIALS	TIME
provide for our clients and agency		A. A Reason for Each Personality B. A Sincere Desire to Help Others II. How Some Residents View Volunteers		
G. To recognize the agency's role in an organized volunteer program		I. Recruitment A. Prospecting B. Selecting C. Presenting the Job D. Placing the Person II. Training and Orientation A. Showing the Facility B. The History, Purpose and Objectives of the Agency C. The Administrative Structure D. Personnel Policies E. Rules Pertaining to Volunteers F. Familiarizing the Volunteer with His Job III. Supervision IV. Recognition V. Record Keeping VI. Personnel Records VII. Insurance & Liability		